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3.6 Maintaining a Case Part II

Gender: When referring to the Client, she/herself was used throughout Volume 4, SSM for simplicity. However, both genders, male and female, may receive benefits.

3.6.6 Complaints

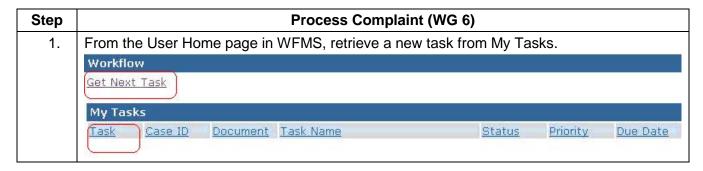
Complaints can come into a Call Center, Service Center, or Help Center from Clients, applicants, third-parties, authorized representatives, or others regarding Coalition or State staff, processes, or policies. The following instructions are for complaints received through various channels.

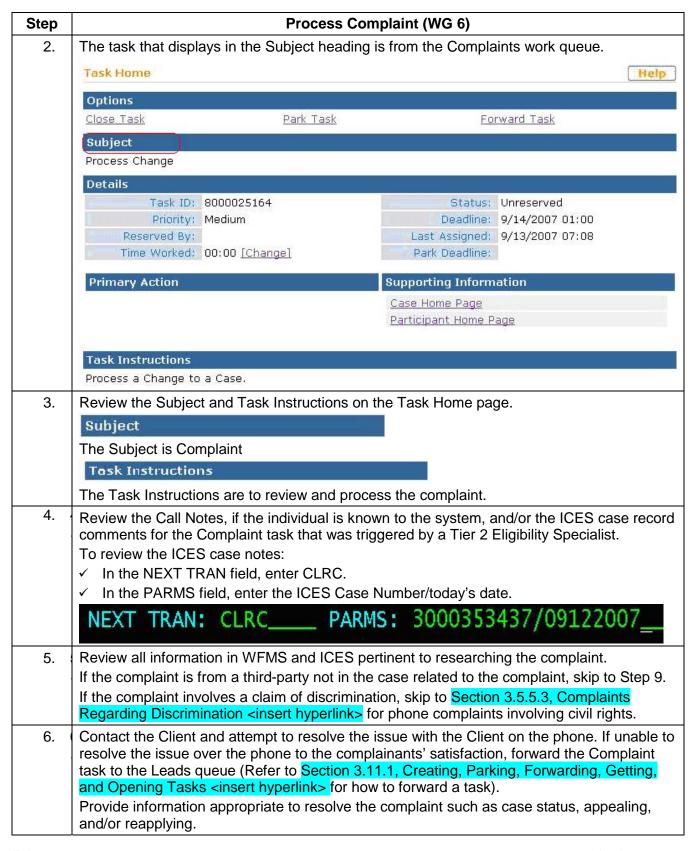
3.6.6.1 Complaint Received by the Call Center

Refer to Section 2.13, Responding to Calls by Type <insert hyperlink> for handling a complaint

3.6.6.2 Process Complaint (WG 6)

WG 6 Eligibility Specialists process complaints that are escalated by Tier 2 Eligibility Specialists. This workgroup processes and follows up on complaints escalated by Tier 2 or that come into the queue as a task from a complaint received by mail or fax. This section addresses complaints escalated from a Tier 2 ES.





Step	Process Complaint (WG 6)
7.	If additional information is needed in order to resolve the complaint, use the Send Notice Work Instructions on how to request additional information/create correspondence.
	Refer to Section 3.11.4, Sending Notices <insert hyperlink="">.</insert>
	If no information is needed, skip to Step 12.
8.	Let the Client know that additional information is needed. Inform her that a notice will be sent to her, and that she must respond to so that the complaint processing can be completed. Go to Step 11.
9.	If the complaint came from a third-party, attempt to contact the individual who made the complaint.
10.	Review the documents in WFMS to determine if there is a release to share information with a third-party.
	Attempt to resolve the issue with the individual who made the complaint over the phone.
	If the complaint is about a specific case or Client, do not provide information unless the Client or individual making the complaint has provided the Client's authorization to release information, or the contacting agency is allowed by policy to receive case specific information.
11.	If additional information is needed from the individual making the complaint, use the Send Notice Work Instructions on how to request additional information/create correspondence. Refer to Section 3.11.4, Sending Notices <insert hyperlink="">.</insert>
	If no information is needed, go to Step 12.
12.	Once the Complaint task has been resolved or additional information has been requested, enter comments in CLRC.
	To enter Running Record Comments on the ICES CLRC screen:
	✓ In NEXT TRAN, enter CLRC.
	✓ In PARMS, enter the ICES Case Number and press Enter .
	NEXT TRAN: CLRC PARMS: 3000353437
	Or if currently in the ICES case, use PF4 to automatically go to CLRC.

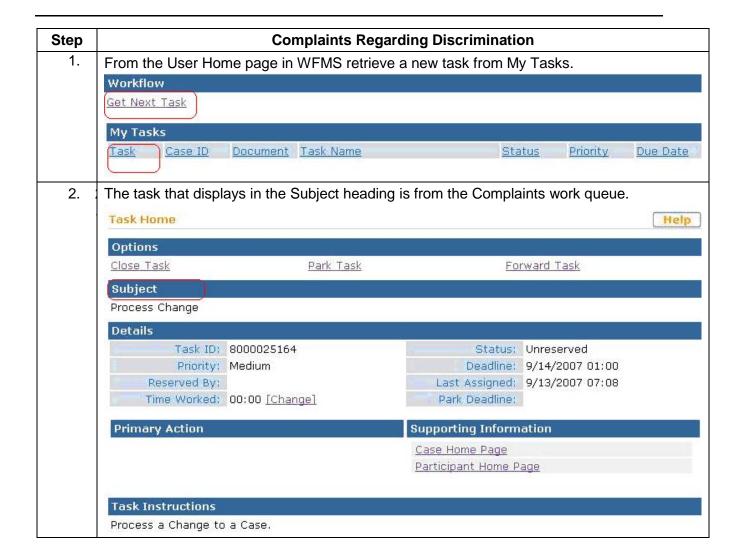
Step	Process Complaint (WG 6)		
13.	The Running Record Comments should now display.		
	CLRC RUNNING RECORD COMMENTS 09/18/07 10:07 T49702 C TEST/JURGE		
	COMMENTS TYPE: GENERAL COUNTY: 49 CASE: 3000353437 INITIAL CONTACT: MEG M FAKECLIENT		
	ENTERED USERID COMMENTS 09/18/07 T49702 Received a call from Lisa, a case manager at the Salvation Army for her client, Meg Fakeclient. She stated she has been trying to get information on her client and no one has returned her phone messages. I checked in Meg's case and		
	09/18/07 T49702 found there is a release so I gave Lisa the information she needed. Complaint resolved.		
	Under the COMMENTS section, update with complaint information. Include who made the complaint, if any additional information is needed to process the complaint, and actions taken to resolve it. After all comments are added, press Enter .		
14.	Once you have pressed Enter, the following question will display:		
	Do you want to update this (Y/N) ?:		
	If all the comments are correct and need to be added to the case record, press "Y" for yes. If the information should not be added to the case record, press "N" for no. However, since this was a new complaint that was received and processed, "N" should not be selected at this time.		
15.	Return to the Task Home page in WFMS, close the task, and retrieve the next task.		

3.6.6.3 Complaints Regarding Discrimination

Discrimination in the Food Stamp, Medicaid and TANF Programs is specifically prohibited on the basis of race, color, national origin, sex, age or disability. The Food Stamp Program also prohibits discrimination for religion or political beliefs.

The original task will come in to the Call Center and a task will be created for WG 6 to complete the task.

Note: If the complaint of discrimination is received by mail or fax, follow the same procedures for reporting to a Regional Manager and the State.



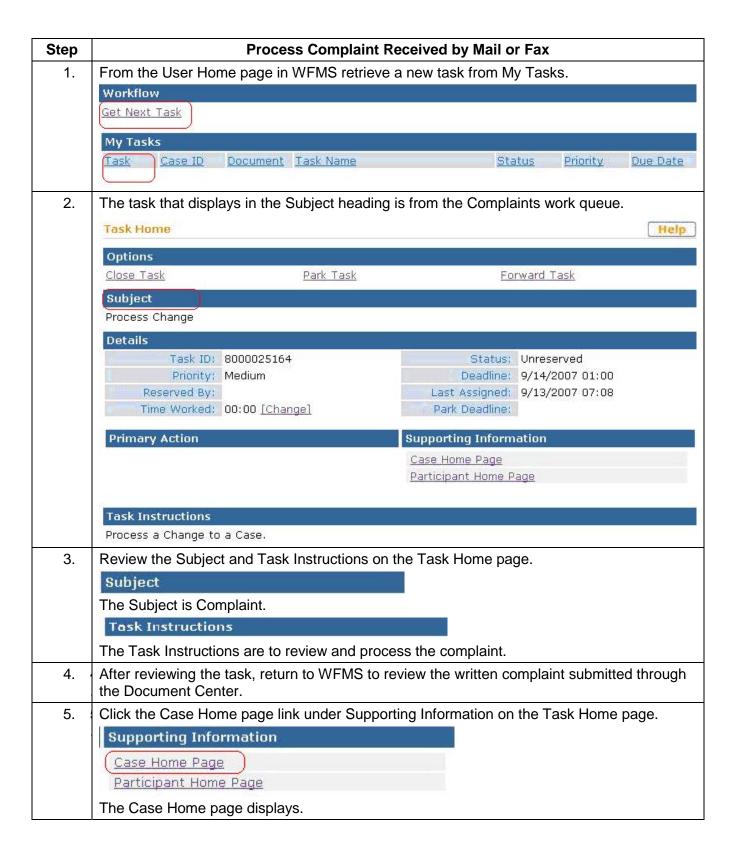
Step	Complaints Regarding Discrimination			
3.	Review the Subject and Task Instructions on the Task Home page.			
	Subject			
	The Subject is	Complaint.		
	Tosk Instruc	tions		
	The Task Instr	uctions are to review and	process the complaint.	
4.	Review the Call Notes and/or the ICES case record comments for the Complaint task that was triggered by a Tier 2 ES. Call Notes will are only available if the complaint is from an individual known to the system and authenticated through the IVR.			
5.		-	arching the complaint in both WFMS in the case related to the complaint,	
6.	Send an e-mail to the Regional Manager for the area where the complaint took place. Include the information gathered in Steps 4 and 5. Send a copy of the email to Roger Zimmerman (Roger.Zimmerman@fssa.IN.gov) at the State office. Regional Managers			
	Region	Manager	Email Address]
	1	Carlean Gadling	Carlean.Gadling@fssa.in.gov	
	2	Kim Teska	Kim.Teska@fssa.in.gov	
	3	Kim Yann	Kim.Yann@fssa.in.gov	
	4	George Herman	George.Herman@fssa.in.gov	
	5	Mary Medler	Mary.Medler@fssa.in.gov	
	6	Felecia Vaccaro	Felicia.Vaccaro@fssa.in.gov	
	7	Susan Carson	Susan.Carson@fssa.in.gov	
	8	Kathy Cook	Kathy.Cook@fssa.in.gov	
7.	To enter Runn ✓ In NEXT TI ✓ In PARMS, NEXT TR	ing Record Comments on RAN, enter CLRC. enter the ICES Case Nu N: CLRCP		

Step	Complaints Regarding Discrimination		
8.	The Running Record Comments should now display.		
	CLRC RUNNING RECORD COMMENTS 09/18/07 10:07 T49702 C TEST/JURGE		
	COMMENTS TYPE: GENERAL COUNTY: 49 CASE: 3000353437 INITIAL CONTACT: MEG M FAKECLIENT		
	ENTERED USERID COMMENTS 09/18/07 T49702 Received a call from Meg Fakeclient today that she felt she was discriminated against when she was applying for benefits Took all the information needed, and sent an e-mail to the Regional Manager for her area, Stan Manager. Complaint		
	09/18/07 T49702 processing completed		
	Under the COMMENTS section, update with: ✓ Explanation of the complaint; ✓ The steps taken to handle the complaint; ✓ And when the e-mail was sent to the Regional Manager of the area where the complaint of discrimination originated. After all comments are added, press Enter.		
9.	The following question displays:		
	Do you want to update this (Y/N) ?:		
	If all the comments that were added are correct and need to be added to the case record, press "Y" for yes. If the information should not be added to the case record, press "N" for no. However, since a complaint of discrimination was received, "N" should not be selected at this time.		
10.	Return to the Task Home page in WFMS, close the task, and retrieve the next task available.		

3.6.6.4 Complaint Received by Mail or Fax

Complaints come into the WG 6 Complaints work queue as tasks titled "Complaints". The tasks can come in through the Document Center by mail or fax and are then be routed to WG 6 by WG 8 Non-Indexed Documents work queue or from other WGs that find the complaint while processing an application, re-determination, or performing other case management activities.

Step	Process Complaint Received by Mail or Fax
------	---



Step	Process Complaint Received by Mail or Fax
6.	From the Case Home page left Navigation bar, select the Documents link. navigation
7.	Review the documents regarding the complaint that were submitted through the Document Center. If the documents show that the complaint is related to Discrimination, refer to Section 3.6.6.3, Complaints Regarding Discrimination <insert hyperlink=""> follow the instructions. If the documents show that the complaint is from the Office of the Governor, FSSA Secretary, or DFR Central office, immediately notify your team lead or supervisor who will notify the Service Center General Manager or one of the Assistant Managers.</insert>
8.	Review the case information in both WFMS and ICES related to the issues stated in the written complaint.
9.	Contact the Client by phone and attempt to resolve the complaint over the phone. Provide information pertinent to resolving the complaint such as case status, how to appeal a decision made on her application/case, and/or reapplying for benefits. If the Client cannot be reached by phone at the first contact, park the task (Refer to Section 3.11.1, Creating, Parking, Forwarding, Getting, and Opening Tasks <insert hyperlink=""> for how to park a task); continue trying to contact the Client during the work day and the following work day, document in the case record comments in ICES for every time an attempt to contact is made. If the Client cannot be contacted by phone, use the Send Notice Work Instructions to create correspondence to the individual who made the complaint. (Refer to Section 3.11.4, Sending Notices WI <insert hyperlink="">). If the complaint was received by a third-party not in the case, skip to Step 12.</insert></insert>

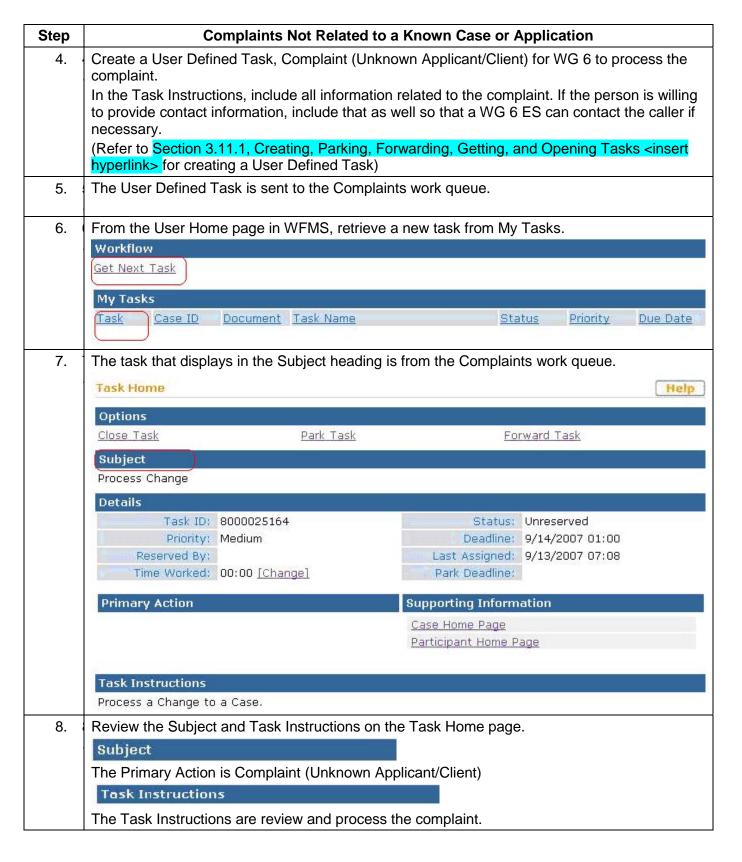
Step	Process Complaint Received by Mail or Fax
10.	If the Client is reporting information that is needed to process a case action or if additional information is needed to resolve the complaint, refer to the Send Notice Work Instructions to request additional information/create correspondence.
	(Refer to Section 3.11.4, Sending Notices <insert hyperlink="">).</insert>
	If no information is needed, skip to Step 14.
11.	Let the Client know that if additional information is needed, a notice will be sent to her that she must respond to so that the complaint processing can be completed.
12.	Try to resolve the issue over the phone with the individual who made the complaint. If the complaint was received by a third-party not in the case, contact the individual with the contact information in the document, and try to resolve the complaint. Before releasing confidential information (e.g. address, telephone number, benefit status, etc.) either verbally or in writing to an individual other than the applicant/Client and/or her Authorized Representative, verify the third party who made the complaint has a release of information signed by the applicant/Client in order to share information in accordance with policy. If unable to resolve the issue over the phone to the complainant's satisfaction, forward the Complaint task to the Leads queue (Refer to Section 3.11.1, Creating, Parking, Forwarding, Getting, and Opening Tasks <insert hyperlink=""> for how to forward a task).</insert>
13.	If additional information is needed from the individual making the complaint, refer to the Send Notice Work Instructions to request additional information/create correspondence. (Refer to Section 3.11.4, Sending Notices <insert hyperlink="">). If no information is needed, go to Step 14.</insert>
14.	Once the Complaint task has been resolved or additional information has been requested, enter comments in CLRC. To enter Running Record Comments on the ICES CLRC screen: ✓ In NEXT TRAN, enter CLRC. ✓ In PARMS, enter the ICES Case Number and press Enter. NEXT TRAN: CLRC PARMS: 3000353437 Or if currently in the ICES case, use PF4 to automatically go to CLRC.

Step	Process Complaint Received by Mail or Fax	
15.	The Running Record Comments should now display.	
	CLRC RUNNING RECORD COMMENTS 09/18/07 10:07 T49702 C TEST/JURGE COMMENTS TYPE: GENERAL	
	COUNTY: 49 CASE: 3000353437 INITIAL CONTACT: MEG M FAKECLIENT	
	COMMENTS 09/18/07 T49702 Received a call from Meg Fakeclient today that she was unhappy with the way she had been treated when she called in to report a change. Asked Meg if there was anything I could help her with. Resolved her issue and created a task	
	09/18/07 T49702 for WG 3 Change work queue to process her change	
	Under the COMMENTS section, update with the information that relates to the complaint received, the steps taken to resolve it, who filed the complaint, and if any additional information is needed to process the complaint. After all comments are added, press Enter .	
16.	The following question displays:	
10.	Do you want to update this (Y/N)? : Y	
	If all of the comments entered are correct and need to be added to the case record, press "Y" for yes. If the information should not be added to the case record, press "N" for no. However, since this was a new complaint that was received and processed, "N" should not be selected at this time.	
17.	Return to the Task Home page in WFMS, close the task, and retrieve the next task available.	

3.6.6.5 Complaints Received That Are Not Related to a Known Case or Application

A complaint may be received in the Call Center that may not be related to any known case or application in WFMS or ICES. For example, a complaint may relate to issues with providers or stores that accept EBT cards.

Step	Complaints Not Related to a Known Case or Application
1.	Call is received in the Call Center as Calling About Anything Else from the Main Menu.
2.	A Tier 1 Intake Consultant, upon hearing the reason for the call, recognizes the call is for a complaint and transfers call to a Tier 2 ES for further assistance.
3.	After taking the call, the Tier 2 ES determines that the complaint is not related to any known applications and/or cases.



Step	Complaints Not Related to a Known Case or Application
9.	Process the complaint accordingly. If unable to resolve the issue over the phone to the complainants' satisfaction, forward the Complaint task to the Leads queue (Refer to Section 3.11.1, Creating, Parking, Forwarding, Getting, and Opening Tasks <insert hyperlink=""> for how to forward a task). If the Lead is unable to resolve the issue and a task needs to be escalated to a State worker, then create a User Defined Task, Complaint (Unknown Applicant/Client) and include all information necessary for the SEC to process the complaint.</insert>
10.	Return to the Task Home page, close the task, and retrieve the next available task.

3.6.6.6 Complaints Requiring State Response

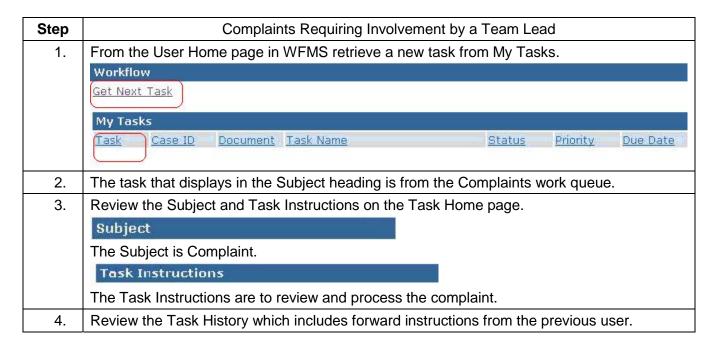
If a complaint is received related to the determination of benefits or other policy related issues, a response from an SEC is needed. A Response to Complainant Required task is created for the FSSA Complaints queue.

Step		Complaints Requiring State Resp	onse
1.		g a Complaint task, it is deemed necessary to spond to the individual who made the compla	
2.	Before creating	the task, update the case record comments in	ICES on CLRC.
3.	✓ In NEXT TRA	ng Record Comments on the ICES CLRC scre AN, enter CLRC. enter the ICES Case Number and press Enter N: CLRC PARMS: 300035 the ICES case, use PF4 to automatically go t	3437
4.	-	ecord Comments should now display.	
	CLRC	RUNNING RECORD COMMENTS	09/26/07 14:16 T49704 A TEST/ROGER
	COMMENTS TYPE COUNTY: 49 CA	: GENERAL ASE: 3000353437 INITIAL CONTACT: MEG M F	AKECLIENT
	ENTERED USE 09/26/07 T49		EG'S COMPLAINT; CREATED
	09/26/07 Т49	704	

Step	Complaints Requiring State Response				
5.	Under the COMMENTS section, update with all the information that relates to the complaint that was received and the steps taken to resolve it, and why the SEC needs to respond to the complainant. After all comments are added, press Enter .				
6.	The following question displays:				
	Do you want to update this (Y/N) ?:				
	If the comments entered are correct and need to be added to the case record, press "Y" for yes. If the information should not be added to the case record, press "N" for no. However, since these are new comments added to CLRC, "N" should not be selected at this time.				
7.	After updating the case record comments, return to WFMS and create the task Response to Complainant Required for the FSSA Complaints work queue.				
	(Refer to Section 3.11.1, Creating, Parking, Forwarding, Getting, and Opening Tasks <insert hyperlink=""> for creating a User Defined Task)</insert>				
8.	After the task is created, close the original Complaint task in WFMS.				

3.6.6.7 Complaints Requiring Involvement by a Team Lead

Complaints can come into a Call Center, Service Center, or Help Center from Clients, applicants, third-parties, authorized representatives, or others regarding Coalition or State staff, processes, or policies. The following instructions are for complaints received through various channels. WG6 processes the complaint. However, if unable to resolve the issue over the phone to the complainant's satisfaction, the task is forwarded to the Leads queue.



Step	Complaints Requiring Involvement by a Team Lead			
5.	Review WFMS/ICES case notes to determine what steps have been taken to resolve the complaint.			
6.	Determine what steps remain, including contact with the client via phone/mail, contact with a third party, or escalating the question to ACS Policy, or an SEM.			
	If involvement by the State is needed, see Section 3.6.6.6			
7.	Complete those steps, documenting each action taken in CLRC.			
8.	Return to the user home page and close the task.			

3.6.7 Hearings and Appeals

A Fair Hearing can be requested by any applicant or Client whose application was denied, whose benefits were closed, or who believes benefits were incorrectly determined. The request for a Fair Hearing must be in writing for Medicaid or TANF. For Food Stamps, the request can be either verbal or written

A Fair Hearing allows for an individual to meet with an Administrative Law Judge (ALJ) and provide additional documentation and testimony regarding whatever disagreement the person has with the determination of benefits received, denied or closed.

3.6.7.1 Process Appeal Requested by Phone

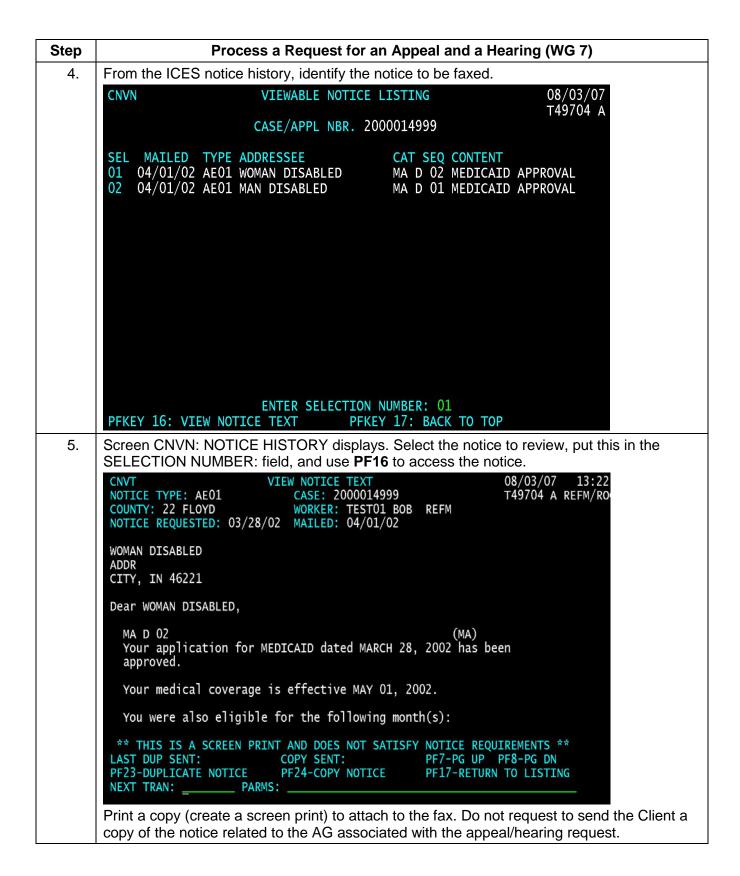
Refer to the Call Center Scripts for processing an appeal requested by phone.

Refer to Section 2.13, Responding to Calls by Type <insert hyperlink>.

3.6.7.2 Process a Request for an Appeal and a Hearing (WG 7)

After receiving the request for an appeal, an ES or ESA in WG 7 Hearings/Appeals processes the request by completing the request for a hearing in ICES, faxing the request to the State Hearings and Appeals unit, completing a pre-conference meeting with the individual who filed the appeal, and preparing a "hearing packet" to present at the hearing with the Administrative Law Judge (ALJ).

Step	Process a Request for an Appeal and a Hearing (WG 7)				
1.	Retrieve the task Appeal Request from the Task Home page.				
2.	Review the notes in the case record comments (CLRC) in ICES regarding the appeal that was requested. To review the notes in CLRC: In the NEXT TRAN field, enter CLRC. In the PARMS field, enter the ICES Case Number/today's date. NEXT TRAN: CLRC PARMS: 3000353437/09122007				
3.	Once the case record comments have been reviewed in ICES, retrieve a copy of the notice that was sent to the Client related to the appeal/hearing request. To review the notice in ICES: ✓ In the NEXT TRAN field, enter CNVN. ✓ In the PARMS field, enter CASE, or to narrow the matches down enter in CASE/CAT/SEQ. NEXT TRAN: CNVNPARMS: 2000014999/MA D/01				



REQUEST TYPE DATE DATE ACTION ISSUE INDIV APPEAL NUMBER: CONT BNFT ?(Y/N): Y *** LOCAL AGENCY CONFERENCE ***	ep q		Proc	ess a Re	quest	for an App	eal an	d a Heari	ng (WG 7)	
7. HERQ should display. HERQ HEARINGS REQUEST/RECEIPTS 09/18/07 10: T49702 C REF CASE CAT SEQ: 2000014999 MA D 01 WORKER ID: TEST01 PAYEE NAME: MAN DISABLED *** FAIR/ADH HEARINGS *** HEARING REQUEST EFFECTIVE ACTION ISSUE INDIV APPEAL NUMBER: ALJ NUMBER: CONT BNFT ? (Y/N): Y FS AND AFDC AH REQ ? (Y/N): _ *** LOCAL AGENCY CONFERENCE *** DC TYPE OFFER DATE ACCEPT/REJECT NUMB	To ✓	o access In the N	the request	t for HER I field, en	Q: HE Iter HE	ARINGS RI ERQ.	EQUES		-	
CASE CAT SEQ: 2000014999 MA D 01 WORKER ID: TEST01 *** FAIR/ADH HEARINGS *** HEARING REQUEST EFFECTIVE ACTION ISSUE INDIV APPEAL NUMBER: ALJ NUMBER: CONT BNFT ?(Y/N): Y FS AND AFDC AH REQ ?(Y/N): _ *** LOCAL AGENCY CONFERENCE *** DC TYPE OFFER DATE ACCEPT/REJECT NUMBER:	7. H	IERQ sho	uld display.	1						
CASE CAT SEQ: 2000014999 MA D 01 WORKER ID: TEST01 *** FAIR/ADH HEARINGS *** HEARING REQUEST EFFECTIVE ACTION ISSUE INDIV APPEAL NUMBER: ALJ NUMBER: CONT BNFT ? (Y/N): Y FS AND AFDC AH REQ ? (Y/N): _ *** LOCAL AGENCY CONFERENCE *** DC TYPE OFFER DATE ACCEPT/REJECT NUMBER:		HERQ		HEAR	INGS	REQUEST/RE	CEIPTS			
HEARING REQUEST DATE DATE ACTION ISSUE INDIV								WORKE		
REQUEST TYPE DATE DATE ACTION ISSUE INDIV APPEAL NUMBER: CONT BNFT ?(Y/N): Y *** LOCAL AGENCY CONFERENCE *** DC TYPE OFFER DATE ACCEPT/REJECT NUMB				*	** FA	IR/ADH HEA	RINGS	***		
CONT BNFT ?(Y/N): Y *** LOCAL AGENCY CONFERENCE *** DC TYPE OFFER DATE ACCEPT/REJECT NUMB				REQUEST DATE				ACTION	ISSUE	REQUESTING INDIVIDUAL
*** LOCAL AGENCY CONFERENCE *** DC TYPE OFFER DATE ACCEPT/REJECT NUMB		_		APPEAL	NUMBE	R:		Al	LJ NUMBER:	
DC TYPE OFFER DATE ACCEPT/REJECT NUMB		CONT BN	FT ?(Y/N):	Υ		FS AND	AFDC A	H REQ ?(Y/N): _	
				***	LOCAL	AGENCY CO	NFEREN	CE ***		
PF16: ADD HEARING REQUEST/RECEIPT		DC	TYPE		OFFER	DATE	ACCE	PT/REJECT	Ţ.	NUMBER
PF16: ADD HEARING REQUEST/RECEIPT						-				
		PF16: AD	D HEARING	REQUEST/	RECEI	PT				
NEXT TRAN: PARMS:		NEXT TRA	N:	_ PARMS:						

Step	Process a Request for an Appeal and a Hearing (WG 7)
8.	Using the PF1 Key allows for Screen Level Help; using Shift+#+Enter in the fields provides information for what needs to be updated in each of the fields to complete the screens. ✓ For a Fair Hearing in the HEARING REQUEST TYPE field, use code "FH". The other option is "AH", which is for Administrative Disqualification Hearings, and those will be requested by WG 5 Benefit Recovery only. ✓ REQUEST DATE is the date that the individual either verbally requested (Food Stamps only) or turned in a written request for a hearing (all programs). ✓ EFFECTIVE DATE is the date the action took place. The date the AG was denied, closed or benefits reduced. The current date or a future date can also be used. ✓ ACTION is a mandatory field and the options are: • 1—Application Denied;
	2—Grant/Benefit Amount;
	• 3—Discontinuance; or
	4—Not Grant or Benefit Related.
	Each ACTION has its own Reference Table Display for each ISSUE associated with the action. Use the following based on the ACTION code used, or access the reason tables by using Shift, #. In the ISSUE field, enter: • 1—RFDI/THRI;
	• 2—RFDI/THRG;
	• 3—RFDI/THRD;
	• 4—RFDI/THRN
	 ✓ REQUESTING INDIVIDUAL is not a mandatory field. Complete it if the individual who requested the hearing is not the Client. Use PF1 to access the Screen Level Help for the different options to use in this field. ✓ CONT BENF? (Y/N) needs to be completed. If benefits should be continued while the appeal is being processed and before the hearing decision is made, then select "Y". If the individual did not request to continue receiving benefits while the appeal is being processed and the hearing decision is made, then select "N". Press Enter to complete the screen.
9.	After pressing Enter, a message displays on the bottom of HERQ.
	G55 - MUST BE FOLLOWED UP WITH HANDWRITTEN REQUEST TO H&A
	✓ The HANDWRITTEN REQUEST is the Client's written request for a hearing if it is for TANF and/or Medicaid, or a statement that is written on the fax coversheet to Hearings and Appeals, documenting that the Client requested a hearing verbally for Food Stamps.
	 ✓ Make a copy of this screen before pressing Enter again. This must be printed in order to send the request to Hearings and Appeals. ✓ Once the copy is printed, press Enter to complete the request.
	2 10p, 10 p

Step	Process a Request for an Appeal and a Hearing (WG 7)				
10.	After HERQ is complete, gather the following information and fax to Hearings and Appeals at (317) 232-4412:				
	✓ The printed HERQ;				
	 ✓ Screen print of the Notice, most likely CNVT; ✓ A copy of the request for the hearing from the Client or a written statement verifying the Client requested a hearing verbally (for Food Stamps only). 				
11.	Contact the Client to determine if the issue can be resolved without having to schedule the hearing.				
12.	If the Client request to withdraw her appeal after contact has been made, skip to the instructions for Section 3.6.7.4, Hearing Withdrawal Received by Phone or Document risert hyperlink .				
	If the Client wishes to continue with his/her appeal, move on to Step 13.				
13.	Return to CLRC and enter comments to verify that the appeal/hearing has been requested and the date HERQ was completed. Include any other details regarding the appeal and hearing request, including the discussion you held with the Client over the phone (or attempted contact made).				
	NEXT TRAN: CLRC PARMS: 3000353437				
	Or if currently in the ICES case, use PF4 to automatically go to CLRC.				
14.	The Running Record Comments should now display. CLRC RUNNING RECORD COMMENTS 09/18/07 10:58 T49702 C REFM/JURGE COMMENTS TYPE: GENERAL COUNTY: 22 CASE: 2000014999 INITIAL CONTACT: MAN DISABLED				
	COMMENTS 09/18/07 T49702 Received a request for a Hearing for the denial of the Medicaid Disability Application that Man had filed Completed HERQ and faxed information to Hearings and Appeals Will complete hearing packet to prepare for scheduled				
	09/18/07 T49702 hearing Will contact Man to set up the pre hearing				
	 ✓ Under the COMMENTS section, update with the information related to the request for an appeal and the steps taken to process the appeal request. ✓ After the comments are added, press Enter. 				
15.	The following question displays:				
	Do you want to update this (Y/N) ?: Y				
	If the comments entered are correct and need to be added to the case record, press "Y" for yes. If the information should not be added to the case record, press "N" for no. However, since this was a new request for an appeal, "N" should not be selected at this time.				

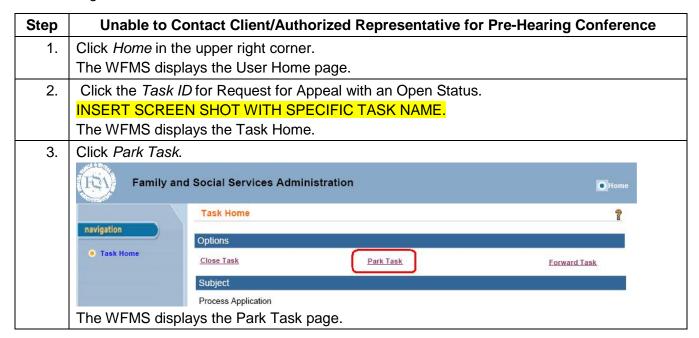
Step		Process a Request for an Appeal and a Hearing (WG 7)				
16.	✓	After the case record comments have been updated, determine if the appeal was filed timely.				
	√	If the appeal was filed timely, create a User Defined task to the Review for Eligibility Determination queue for a SEC to restore the benefits the Client had before the benefits were closed. (Refer to Section 3.11.1, Creating, Parking, Forwarding, Getting, and Opening Tasks <insert hyperlink=""> for creating a User Defined Task)</insert>				
	✓	Follow the instructions in Steps 13 to 15 to update the case record comments regarding the result of the request to reinstate benefits.				

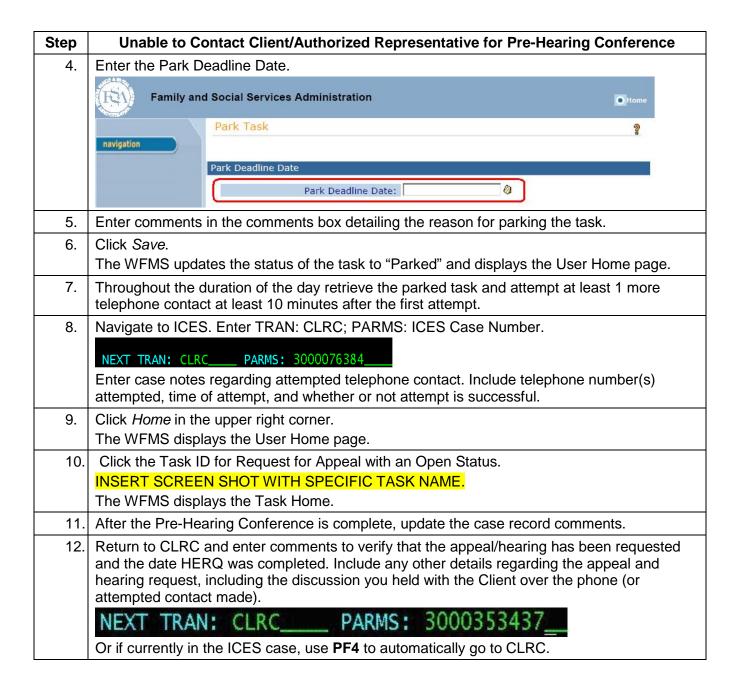
Step	Process a Request for an Appeal and a Hearing (WG 7)		
17.	✓ Prepare the hearing packet that will be used during the hearing proceedings.		
	A copy must be made for the ALJ, the Client, and if the Client has a representative (either Authorized Representative, case manager (from a mental health/health agency), lawyer, etc.), make a copy for the representative.		
	✓ Keep the original to use and present at the hearing.		
	✓ Every packet should have a Hearing Presentation Outline form listing what the exhibits are included and will be presented at the hearing.		
	✓ To obtain this form, use WFMS and select the "Hearing Presentation Outline" form from the list of correspondence types.		
	INDIANA ELIGIBILITY PROCEDURE MANUAL		
	16. Appendix 16 - Hearings and Appeals (Return to on XIII.C above)		
	HEARING PRESENTATION OUTLINE		
	CASE NAME CASE NUMBER WORKER NAME ISSUE		
	EXHIBIT A PAGE(S) THROUGH		
	EXHIBIT B PAGE(S) THROUGH		
	EXHIBIT C		
	The information in the hearing packet should include, but is not limited to: ✓ The request for an appeal/hearing that the Client completed or that was sent to Hearings and Appeals; ✓ Budget screens;		
	✓ Copies of notices sent to the Client, including those that were sent to the Client informing her that the AG she was a part of was denied or closed;		
	✓ Copies of medical records used in the determination of eligibility;		
	✓ Copies of resources or income used to determine eligibility;		
	 Screen prints Reference Table Displays or other screen prints that explain the information used to determine eligibility or to verify information that was reported and used to determine eligibility; 		
	✓ Screen prints of Running Record Comments (CLRC) and/or WFMS notes;		
	✓ Any written communication between the Client and the FSSA, etc.		

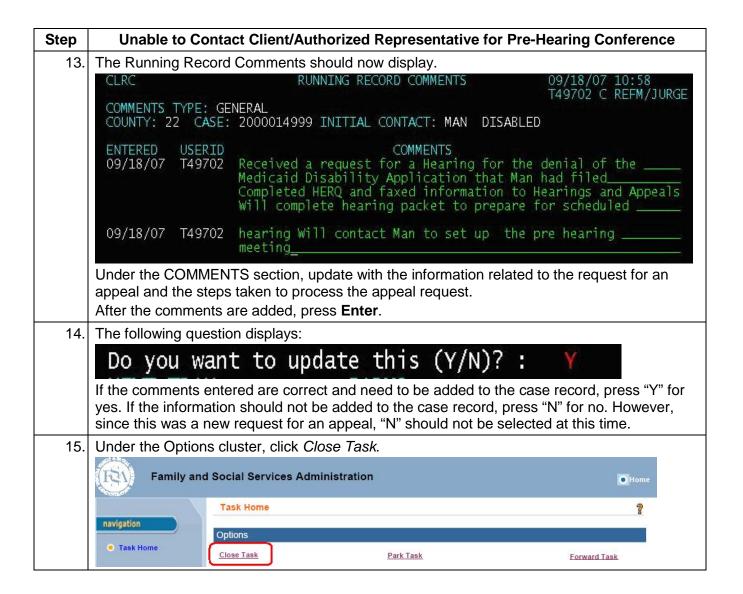
Step	Process a Request for an Appeal and a Hearing (WG 7)
18.	Contact the Client by phone to conduct the Pre-Hearing Conference to explain to the Client: ✓ What information will be used; ✓ What the process is for presenting information; ✓ That she can bring witnesses or others who she wishes to have speak on her behalf; ✓ That she can bring additional documentation she would like to present to the ALJ; ✓ And, if possible, answer any questions that the Client may have regarding the hearing process. If unable to contact the Client, refer to Section 3.6.7.2.1, Unable to Contact
	Client/Authorized Representative for Pre-Hearing Conference <insert hyperlink="">. If the option to leave a voice mail message is available, leave a message identifying yourself as calling on behalf of the FSSA; request the Client/authorized representative return a call back to the Call Center. Upon receipt of the returned call, the Tier 2 agent will route the call to a WG7 ES/ESA.</insert>
19.	After the Pre-Hearing Conference is complete, update the case record comments using Steps 13 to 15.
20.	Return to WFMS, close the Request for Appeal task and retrieve the next task available.

3.6.7.2.1 Unable to Contact Client/Authorized Representative for Pre-Hearing Conference

If unable to contact a Client/authorized representative for a Pre-Conference Hearing, the task must be parked and a 2nd attempt must be made. If the option to leave a voice mail message is available, leave a message identifying yourself as calling on behalf of the FSSA; request the Client/authorized representative return a call to the Call Center and provide information on what extension or workgroup caller should ask to be be routed to. Upon receipt of the returned call, the Tier 2 agent will route the call to a WG7 ES/ESA.





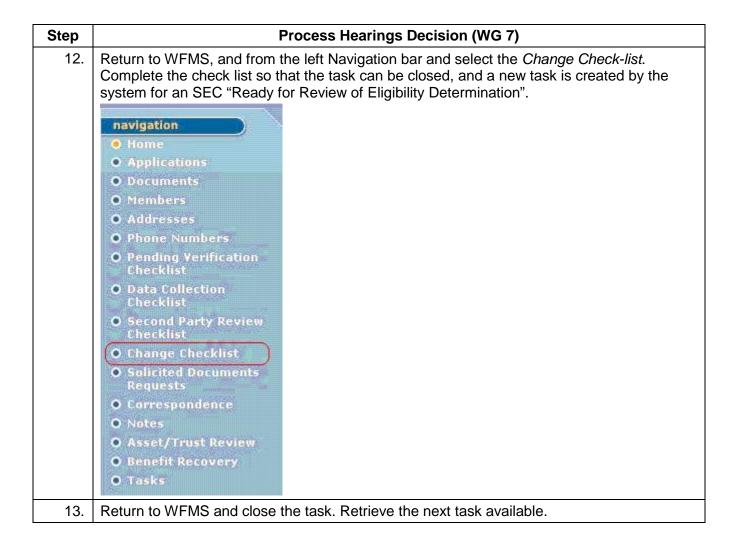


3.6.7.3 Process Hearing Decision (WG 7)

After the hearing is completed, the ALJ makes a decision regarding the appeal. The decision is received by WG 7 in the Hearings/Appeals work queue. An ES or ESA then processes case actions resulting from the decision.

Step	Process Hearings Decision (WG 7)
1.	Retrieve the ICES Alert 311—HEARING DECISION COMPLETE task from the Task Home page under My Tasks.
2.	Return to the Case Home page and using the left Navigation bar select the <i>Documents</i> link.
3.	Retrieve the hearing decision document that was sent by Central Office, and review the decision and other information in the document.

Step	Process Hearings Decision (WG 7)				
4.	If there is no change in benefits for the AG related to the hearing decision, skip to Step 8. If there are changes that need to be made for the AG related to the hearing decision, go to Step 5.				
5.	In ICES, update all screens necessary to comply with the hearing decision made by the ALJ.				
6.	If a FIAT is needed so that the AG is receiving the correct benefits based on the hearing decision, see Section (insert section).				
	If a Benefit Recovery is needed after the ALJ has sustained the State's original decision, create a task for WG 5. In the Task Instructions, include the information related to the hearing decision.				
	(Refer to Section 3.11.1, Creating, Parking, Forwarding, Getting, and Opening Tasks <insert hyperlink=""> for creating a User Defined Task)</insert>				
7.	Once all appropriate actions have been taken to the case in ICES related to the hearing decision, update the case record comments.				
8.	To enter Running Record Comments on the ICES CLRC screen: ✓ In NEXT TRAN, enter CLRC. ✓ In PARMS, enter the ICES Case Number and press Enter .				
	NEXT TRAN: CLRC PARMS: 3000353437				
	Or if currently in the ICES case, use PF4 to automatically go to CLRC.				
9.	The Running Record Comments should now display. CLRC RUNNING RECORD COMMENTS 09/18/07 10:58 T49702 C REFM/JURGE COMMENTS TYPE: GENERAL COUNTY: 22 CASE: 2000014999 INITIAL CONTACT: MAN DISABLED				
	ENTERED USERID COMMENTS 09/18/07 T49702 Received a request for a Hearing for the denial of the Medicaid Disability Application that Man had filed Completed HERQ and faxed information to Hearings and Appeals Will complete hearing packet to prepare for scheduled				
	09/18/07 T49702 hearing Will contact Man to set up the pre hearing meeting				
10.	Under the COMMENTS section, update with the information related to the hearing decision, steps taken to process the decision, any changes in benefits, etc After all comments are added, press Enter .				
11.	The following question displays:				
	Do you want to update this (Y/N) ? : Y				
	If the comments entered are correct and need to be added to the case record, press "Y" for yes. If the information should not be added to the case record, press "N" for no. However, since this was a hearing decision received from Central Office, "N" should not be selected at this time.				



3.6.7.4 Hearing Withdrawal Received by Phone or Document

A hearing withdrawal can be made in several different ways. An individual, third party or Authorized Representative may contact the Call Center to withdraw a request to appeal a decision. Such a request may also be made by submitting a written statement to the Document Center. A third party may only request to withdraw if they are the initiating appellant, such as a medical provider. After contacting a Client by phone, the Client may decide to withdraw her request to appeal a decision made on her application or case.

If the request is received through the Call Center verbally and is not for Food Stamps, inform the individual that she needs to submit the request to withdraw her appeal in writing and can mail or fax that to the FSSA Document Center.

Step	Hearing Withdrawal Received by Phone or Document
1.	The task Appeal Withdrawal Request is retrieved from the User Home page.
	Select the task. The Task Home page should display next.

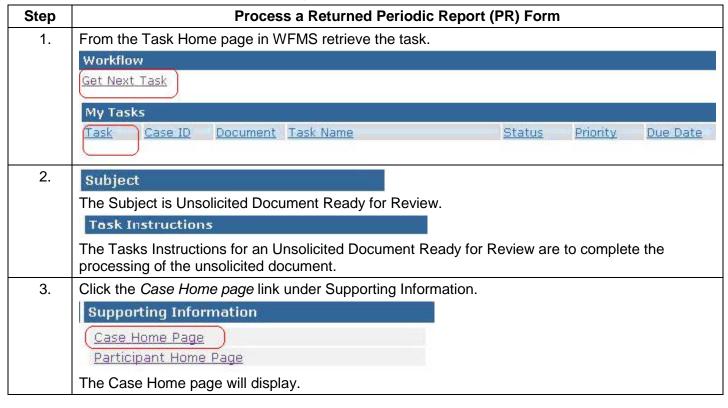
Step	Hearing Withdrawal Received by Phone or Document						
2.	From the Task Home page, review the Subject and Task Instructions.						
	Subject						
	The Subject is Appeal Withdrawal Request.						
	Task Instructions						
	The Task Instructions are to process a request to withdraw an appeal.						
3.	Obtain the following information from the Client and document in CLRC: ✓ The date of communication with the Client; ✓ The method of communication;						
	✓ With whom the communication took place, either the Client or his/her Authorized Representative;						
	✓ The reason for the withdrawal if available.						
	✓ If all the information was available from the Client or is included in the statement submitted, then go to the next step.						
	✓ If the information is not available from the information submitted in writing, attempt to contact the Client to obtain all necessary information. When the information is obtained, move on to the next step.						
	✓ If the Client cannot be reached by phone, use the Send Notice Work Instructions and request the needed information using a Pending Verification Notice for Applicants/Recipients. Refer to Section 3.11.4, Sending Notices <insert hyperlink="">.</insert>						
4.	To enter Running Record Comments on the ICES CLRC screen:						
	✓ In NEXT TRAN, enter CLRC.						
	✓ In PARMS, enter the ICES Case Number and press Enter.						
	NEXT TRAN: CLRC PARMS: 3000353437						
	Or if currently in the ICES case, use PF4 to automatically go to CLRC.						
5.	The Running Record Comments should now display.						
	CLRC RUNNING RECORD COMMENTS 09/26/07 10:29 T49704 A REFM/ROGER						
	COMMENTS TYPE: GENERAL COUNTY: 22 CASE: 2000014999 INITIAL CONTACT: MAN DISABLED						
	COMMENTS 09/26/07 T49704 RECEIVED A TELEPHONE CALL TODAY FROM MAN DISABLED TO VERBALLY WITHDRAW HIS FS DENIAL HEARING REQUEST. MAN DISABLED DID NOT INDICATE A REASON FOR THIS WITHDRAWAL REQUEST						
	09/26/07 T49704						

Step	Hearing Withdrawal Received by Phone or Document
6.	Under the COMMENTS section, update with the information that the Client provided regarding the request to withdrawal his/her appeal. After all comments are added, press Enter .
7.	The following question displays: Do you want to update this (Y/N)?: Y
	If the comments entered are correct and need to be added to the case record, press "Y" for yes. If the information should not be added to the case record, press "N" for no. However, since this was a withdrawal of an appeal request, "N" should not be selected at this time.
8.	After the case record comments have been updated: ✓ Send a fax to Hearings and Appeals at (317) 232-4412; ✓ Include the copy of the written request for a withdrawal; or add a comment to the fax cover sheet if the withdrawal was received verbally (for Food Stamps only).
9.	Return to WFMS. Close the task (if received via task) and retrieve the next task available.

3.6.8 Periodic Reports for the Transitional Medical Assistance (MA F) Category

For those covered under the Transitional Medical Assistance (MA F) category to continue receiving benefits, income must be verified, and the Client must complete a Periodic Report Form every three, six, and nine months that the AG is eligible for MA F. The Periodic Report Forms are generated automatically out of ICES, but it is the Client's responsibility to turn in proof of income and proof of child care (if applicable) for the months listed on the Periodic Report Form.

3.6.8.1 Process a Returned Periodic Report Form



Step	Process a Returned Periodic Report (PR) Form					
4.	From the Case Home page, click the <i>Documents</i> link from the left Navigation bar table. Navigation					
	O Addresses O Phone Numbers O Pending Verification Checklist O Data Collection Checklist O Second Party Review Checklist O Change Checklist O Solicited Documents					
	Requests O Correspondence O Notes O Asset/Trust Review O Benefit Recovery O Tasks					
5.	Next to the Periodic Report Form, select <i>View</i> to review the form and all associated documents.					

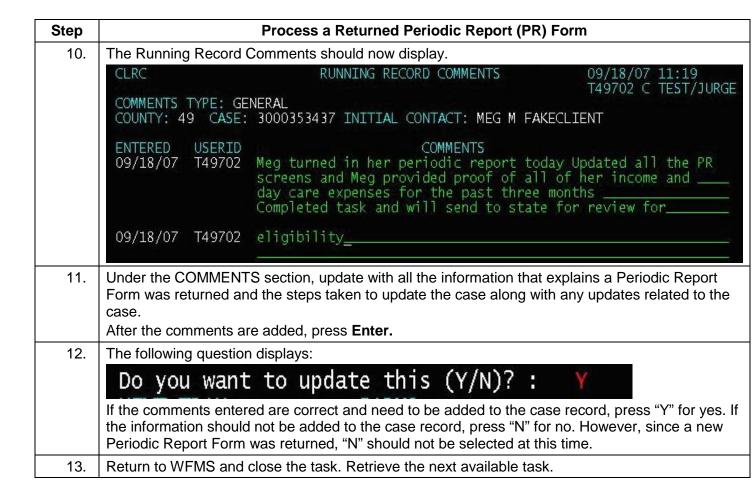
Step	Process a Returned Periodic Report (PR) Form							
6.	In ICES access the PERIODIC REPORTING MENU (MNPR) by entering MNPR in the NEXT TRAN field and pressing Enter .							
	MNPR PERIODIC REPORTING MENU 09/18/07 11:09 T49702 C TEST/JURGE							
	FUNCTION NUMBER FUNCTION DESCRIPTION	TRAN CODE PARAMETERS						
	1 - PERIODIC REPORTING REGISTRATI	ION (PRRG) NOT REQUIRED						
	2 - PERIODIC REPORTING HISTORY	(PRHI) CASE/CAT/SEQ/(DATE)						
	3 - PERIODIC REPORTING EARNINGS	(PRES) CASE/CAT/SEQ/(DATE)						
	4 - PERIODIC REPORTING CHILD CARE	(PRCC) CASE/CAT/SEQ/(DATE)						
	*** ALL DATE FORMATS ARE CCYYMM ***							
	*** PLEASE ENTER THE NUMB	BER OF THE DESIRED FUNCTION: _						
	PARAMETERS:							
	PRESS PF1 FOR HELP NEXT TRAN: PARMS:							
	PARMS field.	n the NEXT TRAN field and CASE/CAT/SEQ in the						
	NEXT TRAN: PRES PARM	S: 3000353437						
7.	The next screen to display will be PRES: PER	RIODIC REPORTING EARNINGS.						

Step	Process a Returned Periodic Report (PR) Form								
	PRES PERIODIC REPORTING EARNINGS					07/25/07 11:35 T49702 C TEST/JURGE			
	CASE NUMBER 3000012801	CODE/SEQ	DATE SENT R 03/29/02 0	ECEIVED	CODE	GOOD CAUSE N	RSN CODE	JAN F	SIZE EB MAR 2 2
	JAN DO SRO EAR	NUARY RNINGS FREC	Q DC SRC	FEBRUARY EARNINGS		DC	SRC	MARCH EARNING	S FREQ
			==		=	5			2
					-	-	_		-
					=	_	=		
					-	=	_		_
					_	-	_		_
		AN ACCEPTA	E AG SIZE: ABLE REASON	FOR NO EAR	NINGS F	OR ANY			NTRY

Update the following fields with the information provided on the Periodic Report Form:

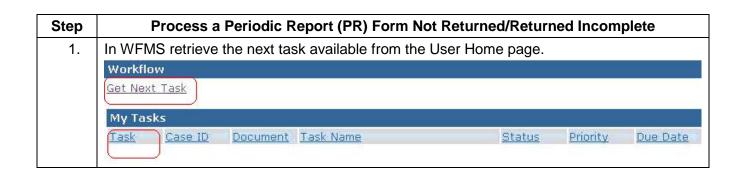
- ✓ DATE RECEIVED: from the date stamp on the Periodic Report Form.
- ✓ STATUS CODE: This pre-fills with "R" for Received if it has been logged on PRRG. Change to one of the reason codes found on Reference Table Display TPRS, access PF1 (screen level help), or use Shift, #, Enter in the Status Code field for the codes to use. If the STATUS CODE is changed to "N" for Not Received, see the instructions in Section 3.6.8.2, Periodic Reort Form Not Returned <insert hyperlink>.
- ✓ GOOD CAUSE: Only complete this field if either "I" for Incomplete or "N" for Not Received was entered into the Status Code field. Must complete with either a "Y" for Yes or "N" for No.
- ✓ RSN CODE: Only complete if the Good Cause field was completed with a "Y". Use Reference Table Display TPRR or Shift, #, Enter in the Reason Code field to determine what reason code to use.
- ✓ AG SIZE: Only update if the Client reported on the Periodic Report Form that there is an additional household member or members.
- ✓ SRC: If the individual has more than one source of earned income, use 01 for the first source of income reported and 02 for the second, and so on. If the individual only reports one source of earned income in the household, only use 01.
- √ (3 MONTHS OF) EARNINGS: The months that need income updated will be pre-determined based on the first month of eligibility for MA F. Update the [MONTH] EARNINGS field with all income that was reported for the three months requested on the Periodic Report Form. Make sure there are enough pay stubs based on the frequency of pay known to the case; otherwise, the Periodic Report is considered Incomplete and needs to be coded as such under the STATUS CODE field.
- ✓ FRQ: How often the individual is paid. Same as what is used on AEINC in the case.
- ✓ IS THERE AN ACCEPTABLE REASON FOR NO EARNINGS FOR ANY MONTH(S)?: If the individual has reported that she lost her employment or someone in the AG has lost employment, and there is good reason that there is no income for the months of earnings

Step	Process a Returned Periodic Report (PR) Form						
	requested, enter in a "Y" for Yes. If there is not a good reason provided or it has already been						
	reported that the individual voluntarily quit her employment, then enter in "N" for No.						
	✓ If the individual reports that she pays for child care and provided verification, then use PF15 to						
	move to PRCC: PERIODIC REPORTING CHILD CARE.						
	✓ If the individual does not pay child care, skip to Step 9.						
8.	PRRC: PERIODIC REPORTING CHILD CARE displays next.						
	PRCC PERIODIC REPORTING CHILD CARE 0//25/0/ 11:53 T49702 C TEST/JURGE						
	CASE CATEGORY DATE STATUS GOOD RSN AG AVERAGE NUMBER CODE/SEQ SENT RECEIVED CODE CAUSE CODE SIZE EARNING 3000012801 MA F 01 03/29/02 07/25/07 R N 0 .00						
	JANUARY FEBRUARY MARCH DC SRC CHILD CARE FREQ DC SRC CHILD CARE FREQ						
	AVERAGE CHILD CARE: .00 ENTER * IN FIELD TO DELETE AN ENTRY						
	NEXT TRAN: PARMS:						
	Some of the information at the top of the screen will already be pre-populated based on the						
	information on PRES that was just updated.						
	Update the SRC, [MONTHS] CHILD CARE, AND FRQ fields for the months where child care was						
	reported and verified to be paid.						
	Press Enter when the screen is complete.						
9.	Once all the required screens have been completed, update the case record comments in ICES.						
	To enter Running Record Comments on the ICES CLRC screen:						
	✓ In NEXT TRAN, enter CLRC.						
	✓ In PARMS, enter the ICES Case Number and press Enter .						
	NEXT TRAN: CLRC PARMS: 3000353437						
	Or if currently in the ICES case, use PF4 to automatically go to CLRC.						

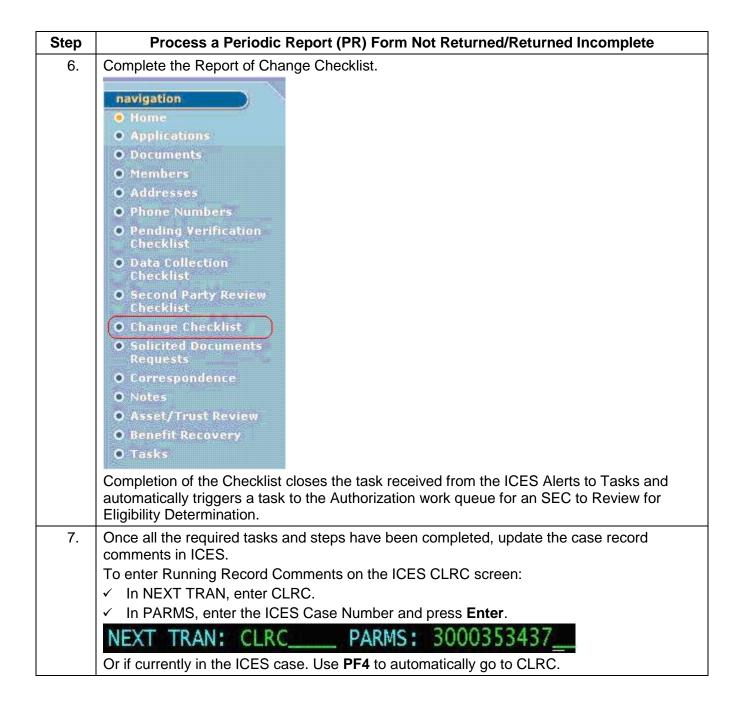


3.6.8.2 Process a Periodic Report Form Not Returned/Returned Incomplete

If an AG member does not return the Periodic Report Form or the returned Periodic Report Form is updated on PRES: PERIODIC REPORTING EARNINGS in ICES as "Incomplete" or "Not Received," then one of two ICES Alerts to Tasks are generated to WG 3 Changes to process the case.



Step	Process a Periodic Report (PR) Form Not Returned/Returned Incomplete							
2.	 ✓ Review the Primary Actions and Task Instructions on the Task Home page. ✓ The task can come from one of two ICES Alerts to Tasks that will generate to the Changes work queue. A. The Primary Action for this task is "ICES ALERT 370—REVIEW MA F-NO TIMELY PER 							
	REP". B. The Primary Action for this task is to "ICES ALERT 372—RESOLVE MA ELIG-NO/INC MA F PR".							
	The Task Instructions for Task A: ✓ Review case images to see if TMA report came in but did not get entered. Search repository of non-indexed documents. Review case notes to see if Client submitted good cause for being late or incomplete. Update ICES case notes with findings. The Task Instructions for Task B: ✓ Review case notes for information pertaining to the TMA report. Search repository of pop-indexed documents. If there is no documentation supporting the delay or non-return							
	non-indexed documents. If there is no documentation supporting the delay or non-return of document, then run AEABC, update ICES case notes, and send to State for eligibility review. Follow the steps in Section 3.6.8.1, Process a Returned Periodic Report Form <insert hyperlink=""> from Steps 3 to 13.</insert>							
3.	If there is missing income verification for any of the months that required earnings be reported (Incomplete) or the Periodic Report Form was not returned (Not Returned) and coded as such on PRES: PERIODIC REPORTING EARNINGS, then return to the case record for the AG associated with the Periodic Report that was turned in incomplete or not turned in at all.							
4.	To access the case and run AEABC in order to process the necessary change to the benefits: ✓ In the NEXT TRAN field, use AEABC. ✓ In the PARMS field, use the Case Number. ✓ Press Enter.							
5.	Once in the case record on AEABC, run AEABC. Any change in benefits resulting from the Periodic Report Form having been turned in Incomplete or as Not Received will display on AEWAA.							



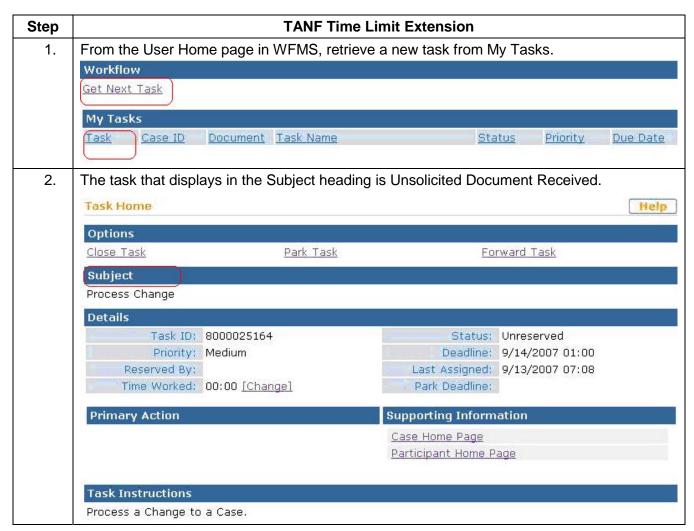
Step	Process a Periodic Report (PR) Form Not Returned/Returned Incomplete							
8.	The Running Record Comments should now display.							
	CLRC RUNNING RECORD COMMENTS 09/27/07 08:19 T49704 A TEST/ROGER							
	COMMENTS TYPE: GENERAL COUNTY: 49 CASE: 3000353437 INITIAL CONTACT: MEG M FAKECLIENT							
	COMMENTS 09/27/07 T49704 RECEIVED ICES ALERT 370 TASK. SEARCHED REPOSITORY FOR MEG'S PER, BUT DID NOT LOCATE. COMPLETED SCREEN PRES; MARKED STATUS CODE AS N=NOT RECEIVED. CHANGE CHECKLIST COMPLETED TASK CREATED FOR FSSA CHANGE AUTHORIZATION QUEUE							
	09/27/07 T49704							
	09/27/07 T49704							
9.	Under the COMMENTS section, update with information that explains a Periodic Report Form was either returned as incomplete or never returned at all. After all comments are added, press Enter .							
10.	The following question displays:							
	Do you want to update this (Y/N) ? : Y							
	If the comments entered are correct and need to be added to the case record, press "Y" for yes. If the information should not be added to the case record, press "N" for no. However, since a Periodic Report Form was returned incomplete or not returned at all, "N" should not be selected at this time.							
11.	Return to WFMS and retrieve the next available task.							

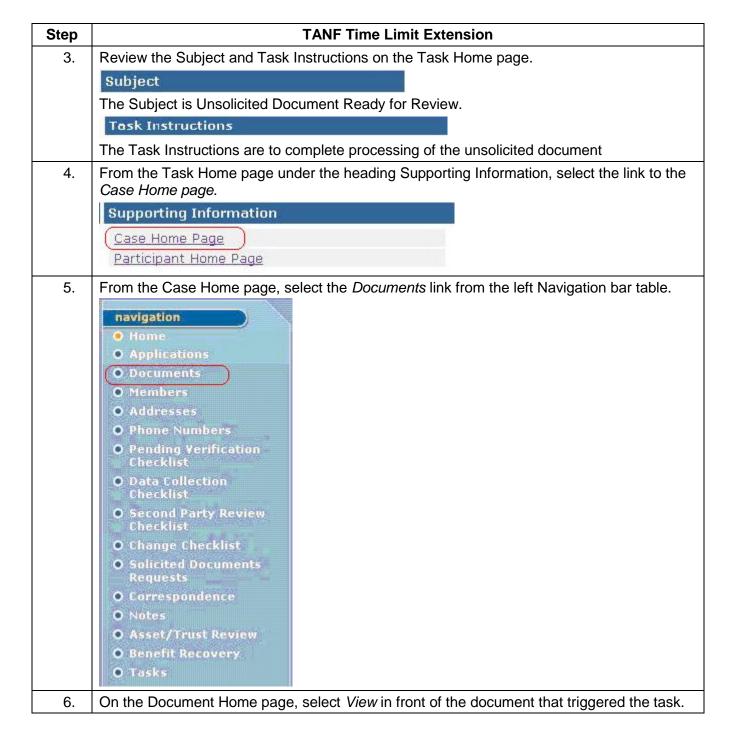
3.6.9 TANF Time Limit Extensions

If an individual has received TANF and has used all of the available months of eligibility, which is twenty-four (24) for adults, then she will receive an ICES generated notice informing her that she can request an extension of the months she may be eligible to receive.

A Client must turn the request for an extension in to the Document Center in writing. The Client needs to include reasons why she feels she is eligible or should be considered for the time limit extension.

Since most of the supporting documentation for the time limit extension uses Indiana Manpower Placement and Comprehensive Training (IMPACT) information to support an extension or a denial of the extension request, an ARBOR Case Manager will complete the packet that needs to be submitted to the State for review and determination of the time extension request for TANF.





Step	TANF Time Limit Extension						
7.	After reviewing the document, it is found that a Client is requesting a TANF Twenty-Four (24) Month Extension. ✓ An Arbor Case Manager must complete the extension. ✓ Create a User Defined task to the Arbor Area work queue indicating an individual has requested a TANF 24 Month Extension. ✓ Make sure to include information in the creation of the User Defined task that informs						
	the Arbor Case Manager that there is a copy of the request attached to the case in WFMS.						
	(Refer to Section 3.11.1, Creating, Parking, Forwarding, Getting, and Opening Tasks <insert hyperlink=""> for creating a User Defined Task)</insert>						
8.	After the task has been generated, return to ICES and update the case record comments regarding the task that was received and the one that was created for an Arbor Case Manager to process.						
9.	To enter Running Record Comments on the ICES CLRC screen: ✓ In NEXT TRAN, enter CLRC. ✓ In PARMS, enter the ICES Case Number and press Enter.						
	NEXT TRAN: CLRC PARMS: 3000353437 Or if currently in the ICES case, use PF4 to automatically go to CLRC.						
10.	The Running Record Comments should now display. CLRC RUNNING RECORD COMMENTS 09/18/07 11:19 T49702 C TEST/JURGE COMMENTS TYPE: GENERAL COUNTY: 49 CASE: 3000353437 INITIAL CONTACT: MEG M FAKECLIENT						
	ENTERED USERID COMMENTS 09/18/07 T49702 Meg turned in a request for a 24 month extension on her TANF today Updated the appropriate information and created a task for the Arbor Area work queue to complete the request_						
11.	Under the COMMENTS section, enter the information regarding the task and the actions taken to process the request for a time limit extension for TANF. After comments are added, press Enter .						
12.	The following question displays: Do you want to update this (Y/N)?:						
	If the comments entered are correct and need to be added to the case record, press "Y" for yes. If the information should not be added to the case record, press "N" for no. However, since new comments were added to CLRC, "N" should not be selected at this time.						
13.	Return to the Task Home page and close the task. Retrieve the next task available.						

3.6.10 Replacement of Food Stamps Due to Disaster *Need these instructions from Kim S.

3.6.11 WG 12 Waiver/Nursing Home Tasks

WG 12 consists only of Eligibility Specialists-Adult who specializes in cases related to Nursing Homes and individuals who have been approved for and are receiving Waivers.

While WG 12 ESAs process Applications and Re-determinations on any case that either has an AG with an individual in a Nursing Home or has a Waiver, the ESAs in WG 12 do not process any changes related to these AGs. WG 3 ESAs process all changes for any cases with Adult Related Medicaid, Nursing Home, and Waiver AGs.

Refer to Section 3.5, Processing an Application WI part I and Part II <insert hyperlink> for Processing Applications for Waiver and/or Nursing Homes.

Refer to Section 3.6 Maintaining a Case WI Part I, Changes for processing changes related to Waiver and/or Nursing Home cases.

3.6.12 Medicaid Disability Progress Reports

After some Medicaid Disability cases are already authorized, the AG will require a Progress Report to be done usually after the individual has been receiving MAD or Medicaid for the Disabled Worker (MA DW) coverage for at least twelve (12) months.

Step	PROGRESS REPORTS						
1.	Review the task name and task instructions.						
2.	Click on the Case Home Page link under supporting information.						
3.	In ICES, review AEIDP and AEOMD for the client needing the progress report. If there are multiple Ma D assistance groups, be sure to review the appropriate client data.						
4.	Determine what type of progress report is needed under TYPE field from AEOMD. • List can be found using TRAN: RFDI PARMS: TRDC						
5.	Using the phone number on AEICI, call the client to complete the 251B. (access to the form listed in next step)						
	 Do not ask for all providers from the past 12 months, but instead ask ONLY for doctors that will satisfy the request on AEOMD. For example, if MG (general medical/surgical) is listed, ask the client for the name/address of their currently primary care physician ONLY. 						
	 For sections that require caseworker input from observing the client, be sure to enter that the client was not seen in person, or spoken with on the phone, as appropriate. 						
6.	Access 251B in WFMS						
	Currently listed under correspondence link						
	 Complete the form, X out of it, click SAVE, click yes to mail, then edit from mail to printed at help center so that it won't be mailed out to client. 						
	View PDF and save the document to your computer						
	 Click on Documents in the left navigation, click attach document, and save the document to the case 						
7.	Send 2032 to client with releases for the appropriate doctors.						
	 If they have not seen a doctor to satisfy the request on AEOMD, send the Initial Notice to Applicant, marking both the first and second sections outlining what is needed. 						
8.	If the client cannot be reached by phone, schedule an appointment in ICES for us to call them to complete the 251B.						
	 Follow 4.10.4 scheduling procedures, with an appointment at least 6 business days out so the client is notified of the appointment. 						

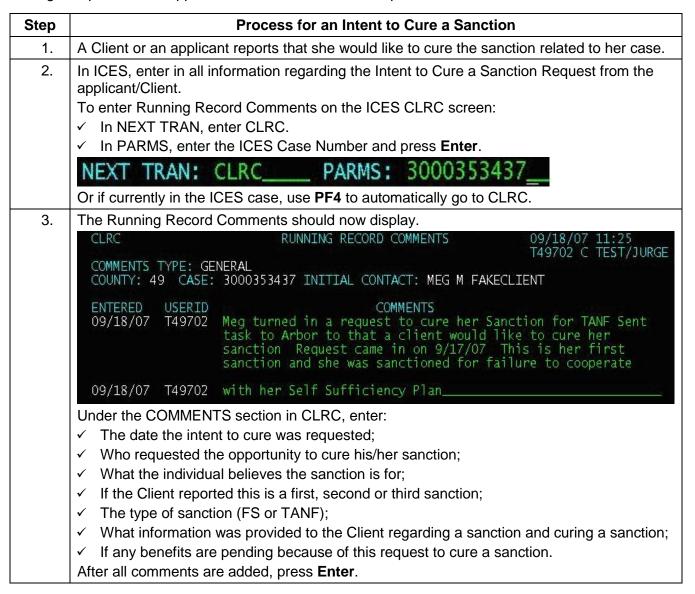
Step	PROGRESS REPORTS						
9.	If the client has no phone, send a detailed 2032 with a 10 day due date explaining everything needed to complete the 251B. (Much of the info needed on 251B is already in ICES, such as highest grade completed, etc.)						
	 Specific doctor(s) name/address/phone to fulfill MRT request 						
	List of meds, including dosage						
	List of ailments, including begin dates						
	General physical/mental restrictions, etc						
10.	Document in CLRC each step taken, doctor information, and current status of the progress report.						
11.	Close Task						

3.6.13 IMPACT Related Tasks

Most of the sanction related tasks are found in the ICES Alerts to Tasks and are processed like any other change and according to the task instructions. However, there are times when a task might need to be generated to an Arbor Case Manager and one of the Arbor work queues. These instructions are provided for those tasks.

3.6.13.1 Intent to Cure a Sanction

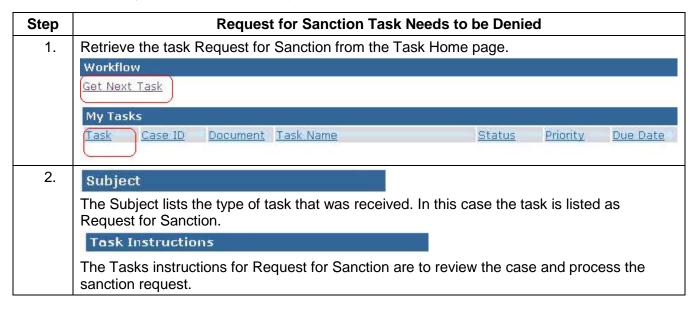
During a call to the Call Center, during a Data-Gathering Interview with an applicant/Client, or after receiving a written request, the applicant/Client states she would like to cure a sanction she currently has on her case. An Intent to Cure task is created and forwarded to an Arbor Case Manager to process the applicant/Client's intent to cure request.

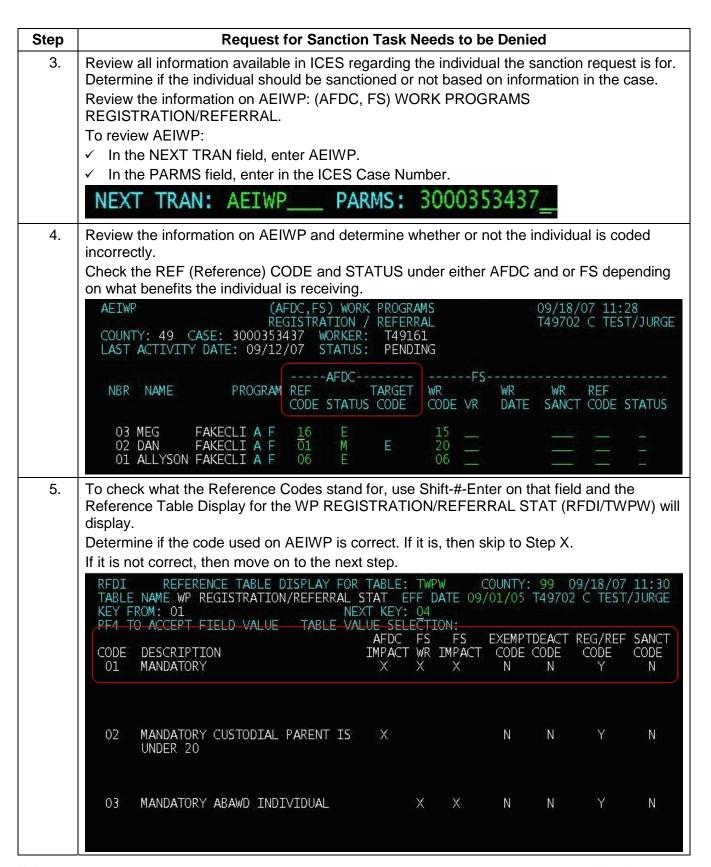


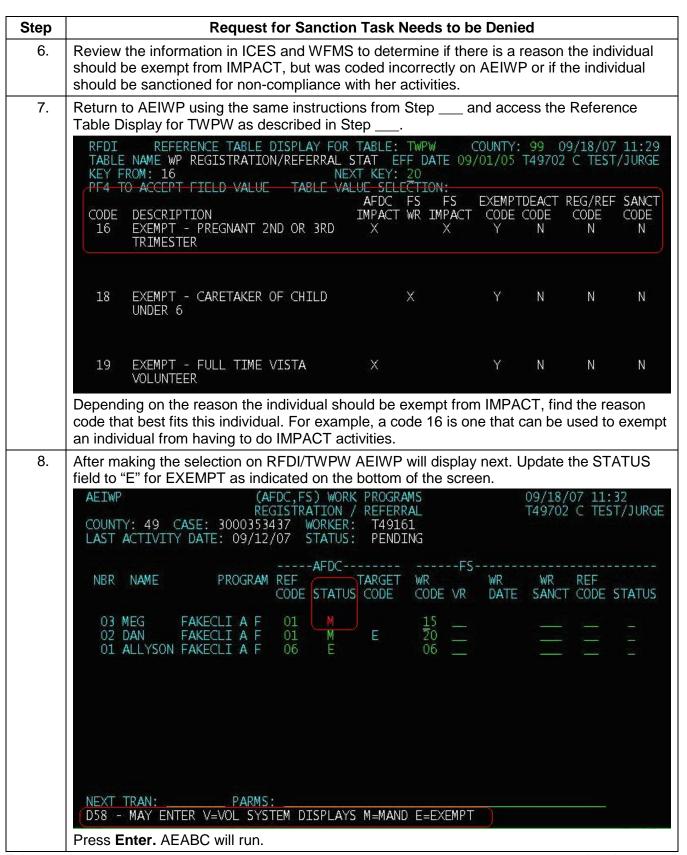
Step	Process for an Intent to Cure a Sanction							
4.	The following question displays:							
	Do you want to update this (Y/N)? : Y							
	If the comments entered are correct and need to be added to the case record, press "Y" for yes. If the information should not be added to the case record, press "N" for no. However, since this is triggering a task to another Coalition group, "N" should not be selected at this time.							
5. After the case record comments have been updated in ICES, return to WFMS task for an Arbor Area work queue titled, Intent to Cure for <client name=""> an RID>.</client>								
	(Refer to Section 3.11.1, Creating, Parking, Forwarding, Getting, and Opening Tasks <insert hyperlink=""> for creating a User Defined Task)</insert>							

3.6.13.2 Request for Sanction Task Needs to be Denied

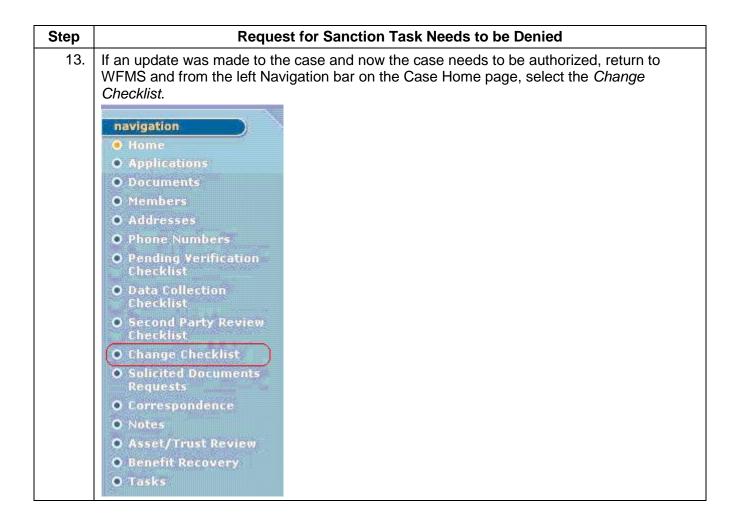
If an individual is working with Arbor for her mandatory IMPACT activities and that individual has not completed her required hours without good cause then an Arbor Case Manager might send the task "Request to Sanction" to the Changes work queue for WG 3 to process. However, if the individual has provided proof that she is exempt from completing activities then a response needs to be sent to Arbor to let them know that the individual cannot or should not be sanctioned and why the individual is exempt.

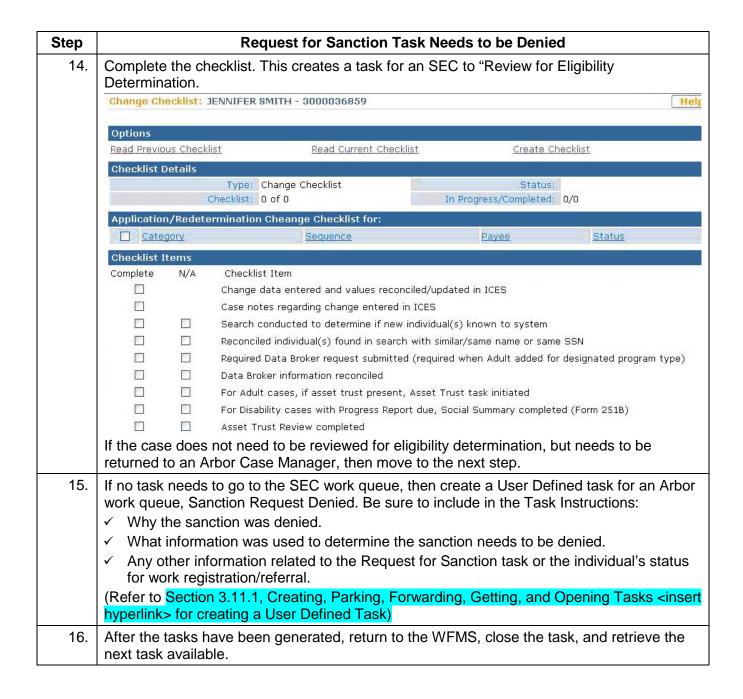






Step	Request for Sanction Task Needs to be Denied						
9.	After running AEABC, update ICES screen CLRC with the case record comments. If there were no updates needed to AEIWP and the individual should not be sanctioned, move to the next step.						
10.	In ICES, enter the Running Record Comments on the ICES CLRC screen: ✓ In NEXT TRAN, enter CLRC. ✓ In PARMS, enter the ICES Case Number and press Enter. NEXT TRAN: CLRC PARMS: 3000353437 Or if currently in the ICES case, press PF4 to automatically go to CLRC.						
11.	The Running Record Comments should now display. Under the COMMENTS section, enter the actions completed for the Request for Sanction task. Make sure to include any updates made to the case and why the sanction request was denied. After the comments are added, press Enter .						
12.	The following question displays: Do you want to update this (Y/N)?: If the comments entered are correct and need to be added to the case record, press "Y" for yes. If the information should not be added to the case record, press "N" for no. However, since new comments were added, "N" should not be selected at this time.						





3.6.14 Processing of a Medicaid Category Change (Clevidence v. Sullivan)

After processing a task, it is found that an individual is no longer eligible for Medicaid under her current category and no new category is forming and passing. It is necessary to determine if the individual may be eligible for other Medicaid coverage. These steps provide instructions on processing such a situation.

NOTE: If ICES automatically forms a new passing category, review the budget for correctness and complete a change checklist, which generates a task for an SEC to review.

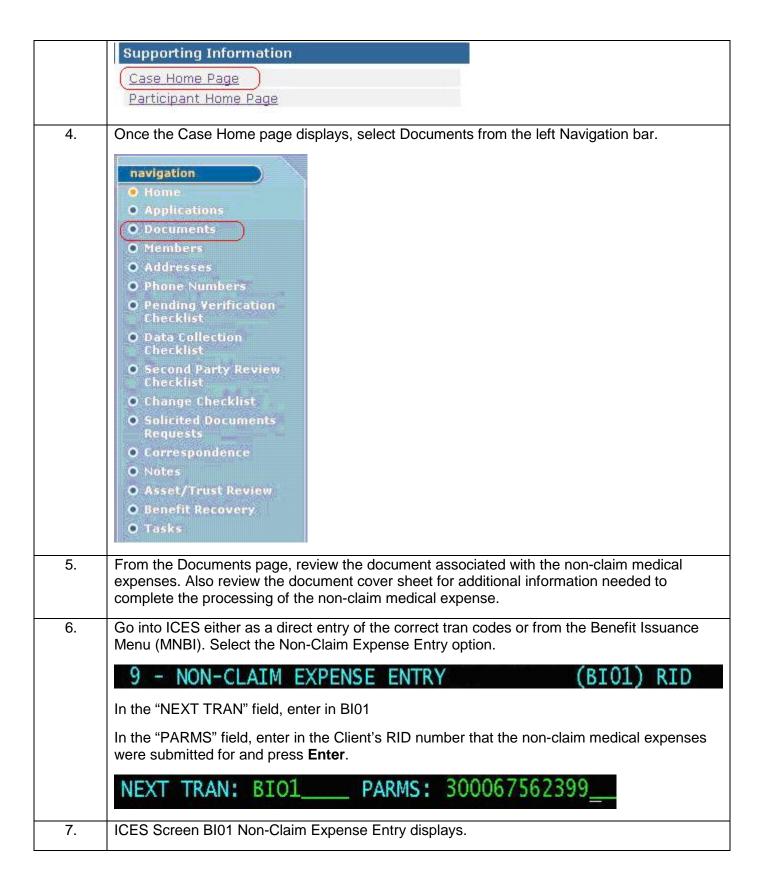
Step	Processing Medicaid Category Change						
1.	Review the information on ICES screen AEWAA, to determine if the recipient may be eligible under another category according to policy.						
	AEWAA ASSISTANCE GROUP AUTHORIZATION 09/18/07 11:36 COUNTY: 49 CASE: 3000353437 WORKER: T49161 T49702 C TEST/JURGE LAST ACTIVITY DATE: 09/18/07 STATUS: PEND REDETERMINATION MONTH: 022008 BUDGET ELIG MONTHLY AG EFFECTIVE CAT SEQ RE PAYEE STAT AMOUNT STAT ***REASON CODES**** DATE AUTHOR ADC 01 M FAKEC FAIL .00 PEND 564 600 10012007 FS 01 M FAKEC PEND .00 PEND 354 09012007 FS 01 M FAKEC PEND .00 PEND 354 09012007 MA 01 D FAKEC FAIL .00 PEND 600 10012007 MA 01 D FAKEC FAIL .00 PEND 600 09012007 MA 01 D FAKEC FAIL .00 PEND 600 09012007 MA 01 D FAKEC FAIL .00 PEND 600 09012007 MA 01 D FAKEC FAIL .00 PEND 600 09012007 MA 01 M FAKEC PEND .00 PEND 480 394 375 10012007 MA M 01 M FAKEC PEND .00 PEND 480 394 375 08012007 MA M 01 M FAKEC PEND .00 PEND 480 394 375 08012007 MA M 01 M FAKEC PEND .00 PEND 480 394 375 07012007 MA M 01 M FAKEC PEND .00 PEND 480 394 375 06012007 MA M 01 M FAKEC PEND .00 PEND 480 394 375 05012007 MA M 01 M FAKEC PEND .00 PEND 480 394 375 05012007 MA M 01 M FAKEC PEND .00 PEND 480 394 375 05012007 MA M 01 M FAKEC PEND .00 PEND 480 394 375 05012007 MA M 01 M FAKEC PEND .00 PEND 480 394 375 05012007 MA M 01 M FAKEC PEND .00 PEND 480 394 375 05012007 MA M 01 M FAKEC PEND .00 PEND 480 394 375 05012007						
2.	After reviewing the information on AEWAA, update the case record comments in ICES on CLRC.						
3.	To enter Running Record Comments on the ICES CLRC screen: ✓ In NEXT TRAN, enter CLRC. ✓ In PARMS, enter the ICES Case Number and press Enter. NEXT TRAN: CLRC PARMS: 3000353437 Or if currently in the ICES case, use PF4 to automatically go to CLRC.						
4.	The Running Record Comments should now display. CLRC RUNNING RECORD COMMENTS 09/18/07 11:37 T49702 C TEST/JURGE COMMENTS TYPE: GENERAL COUNTY: 49 CASE: 3000353437 INITIAL CONTACT: MEG M FAKECLIENT ENTERED USERID COMMENTS 09/18/07 T49702 After processing a change in the case today the Medicaid that Meg was receiving is now failing and is going to close Will contact Meg to keep the benefits open if she wants to apply for Medicaid for the Disabled instead						

Step	Processing Medicaid Category Change						
5.	Under the COMMENTS section, enter information that explains what happened to cause the individual's benefits to end and actions taken to process the case. After all comments are added, press Enter .						
6.	The following question displays:						
	Do you want to update this (Y/N)? : Y						
	If the comments entered are correct and need to be added to the case record, press "Y" for yes. If the information should not be added to the case record, press "N" for no. However, since new comments were added to CLRC, "N" should not be selected at this time.						
7.	Return to WFMS and select <i>Correspondence</i> from the left Navigation bar of the Case Home page. (insert GUI)						
	Using the Send Notice Work Instructions, send a notice of action for Medicaid to the individual whose benefits are changing. Refer to Section 3.11.4, Sending Notices <insert hyperlink="">.</insert>						
8.	Close the task that was originally being processed when the Medicaid Category Change was discovered.						

3.6.14.1 Processing Non-Claim Medical Expenses for Spend-Down

When a Client is receiving Adult Medicaid with a spend-down, then the individual may have expenses for herself or other members of her household to submit that were not processed by her provider, pharmacy, etc. When this happens she will submit what are called, "non-claim" medical expenses to be processed by an ESA in WG 3. The documents will be scanned at the Document Center, sent to the Non-Indexed Documents queue (unless the documents came in through the Document Center with a bar-coded coversheet and go to WG 3) and will be processed by WG 8, who will then send the task to WG 3.

Step	Processing Non-Claim Medical Expenses for Spend-Down							
1.	Select a new task from the work queue. The task is Unsolicited Document Ready for Review							
2.	From the Task Home page review the Subject and Task Instructions.							
	Subject							
	The Subject is Unsolicited Document Ready for Review.							
	Task Instructions							
	The Task Instructions are to complete processing of the unsolicited document.							
3.	From the Task Home page under the Supporting Information cluster, select the Case Home page.							

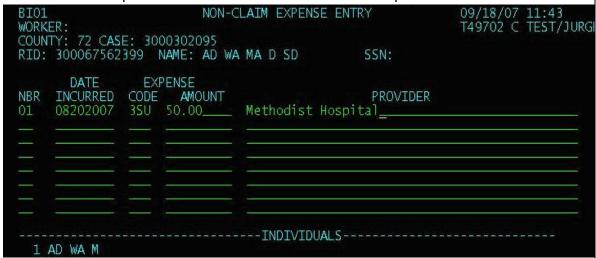


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BIO1 WORK				LAIM EXPENSE	ENTRY	09/18/07 11:43 T49702 C TEST/JURGE
	TY: 72 CAS 300067562		0302095 AME: AD WA	MA D SD	SSN:	
NBR	DATE INCURRED		ENSE AMOUNT		PROVIDER	
		_				
		_ :				
		_				
 1	AD WA M			INDIVIDUA	LS	

Update the screen using the information from the documents associated with the non-claim medical expense submitted for the Client.

- ✓ For NBR, use the individual to whom the expense applies.
- ✓ DATE INCURRED is the date the individual incurred the medical expense.
- ✓ EXPENSE CODE is the type of medical expense the individual submitted. Use shift-#enter to access the Reference Table Display SPEND-DOWN MEDICAL EXP. CODES (RFDI/TNCE).
- ✓ EXPENSE AMOUNT is the amount the individual incurred for the medical expense.
- ✓ PROVIDER is the provider that the individual incurred the expense from.



Press Enter after the screen has been updated with the expenses submitted.

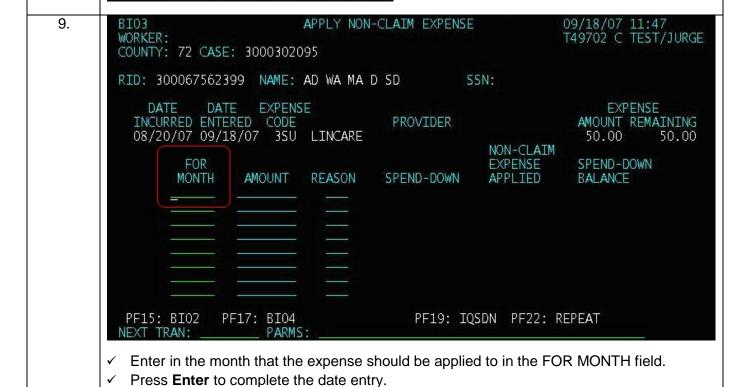
8. The next ICES screen to display is BI02 NON-CLAIM EXPENSE HISTORY

This screen displays the non-claim medical expenses that have been updated for the individual who has a spend-down.

09/18/07 11:45 T49702 C TEST/JURGE NON-CLAIM EXPENSES HISTORY BIO2 WORKER: COUNTY: 72 CASE: 3000302095 RID: 300067562399 NAME: AD WA MA D SD SSN: **EXPENSE EXPENSE** DATE SEL INCURRED ENTERED CODE 08/20/07 09/18/07 3SU **PROVIDER AMOUNT** REMAINING 50.00 METHODIST HOSPITAL 50.00

- ✓ If the individual indicates she would like the expense applied to a month different from the recurring month:
- ✓ From this screen, select the expenses that need to be reviewed by entering an "S" in front of the expense and using **PF16** to move to screen BI03 APPLY NON-CLAIM EXPENSE.
- ✓ If the individual does want the expenses applied to the recurring month:
- ✓ Press Enter and the following message displays.
- ✓ After updating the expenses on BI02, skip to Step12.

M99 - EXPENSE APPLIED



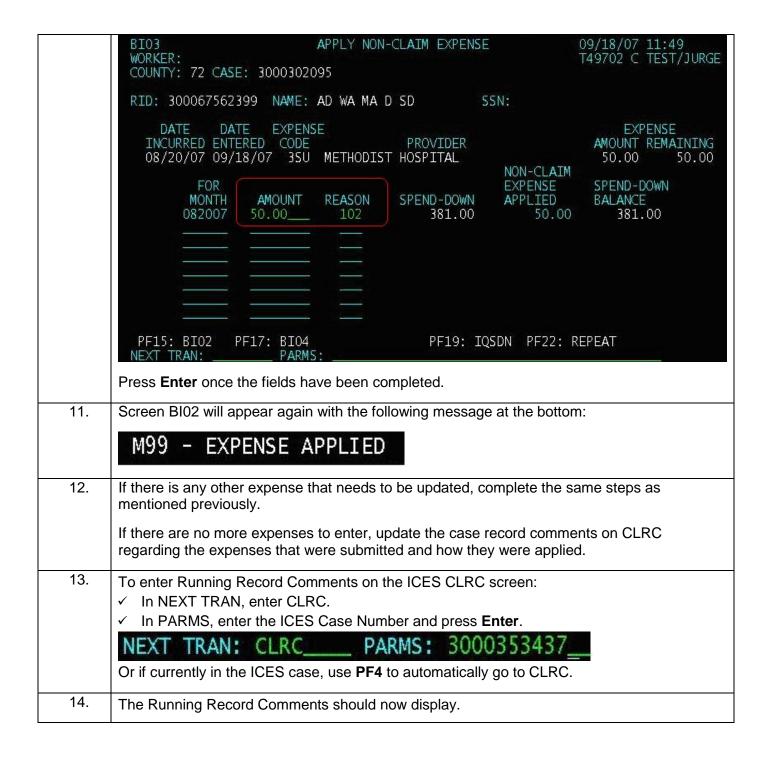
February 29, 2008 3.6-124 Version 1.4

Screen BI03 displays the individual's spend-down amount and reason. Determine the correct

amount to apply to the spend-down and use shift-#-enter to determine what reason the

expense should be used.

10.



	CLRC	RUNNING RECORD COMMENTS	09/26/07 11:25 T49704 A TEST/ROGER			
	COMMENTS TYPE: GENERAL COUNTY: 49 CASE: 3000353437 INITIAL CONTACT: MEG M FAKECLIENT					
	ENTERED USERID 09/26/07 T49704					
	09/26/07 Т49704					
15.	Under the COMMENTS section, update with the information related to the task that was completed, the expenses that were updated (including detailed information regarding expenses applied to a month different that the recurring month and the reason), and all other information related to the processing of the task and the individual's expenses.					
4.0	After all comments are	• • • • • • • • • • • • • • • • • • • •				
16.	The following question					
	Do you want to update this (Y/N) ?:					
	yes. If the information	red are correct and need to be added to the case should not be added to the case record, press "l were added to CLRC, "N" should not be selected	N" for no. However,			
17.	Return to WFMS, and from the Task Home page, close the task.					
18.	Return to the User Home page, and select the next task available.					
	<u> </u>					

3.6.15 Commonly Reported Changes

Many changes are received for cases and applications, and some are more common than others. The following section provides examples of commonly reported changes and the basic steps that need to be completed to process the change correctly.

These are changes that come in as Reported Change tasks to WG 3 ESs and ESAs in the Changes work queue. ICES alerts that create tasks have established task instructions which should be followed accordingly.

3.6.15.1 Add a Baby

Step	Add a Baby
1.	In ICES, go to screen AEIID.
2.	Add the information provided regarding the new baby to be added to the household.
3.	Use PF1 Screen Level Help or Shift+#+Enter in the fields such as the verifications for Social Security Number (SSN), if the baby does not have an assigned SSN and the verification "VR" code should be "AP" for applied.
4.	Press Enter to finish updating AEIID.
5.	The information regarding the baby goes through the Clearance Screens; complete as necessary and press Enter to do so.
6.	The driver begins and the next screen to display is AEIDC; however, AEIPI needs to be updated first. In the NEXT TRAN field, enter in AEIPI and either use PF14 to move to AEIPI or enter in the Case Number in PARMS.
7.	Update AEIPI with the date the baby was born and the verification code for this; use Screen Level Help or Shift+#+Enter for the table of "VR" codes.
8.	Press Enter to finish updating AEIPI.
9.	AEIDC displays again. Update this and all subsequent screens in the driver flow based on the verifications provided. For those fields that might not have corresponding verifications, use a question mark (?) in the "VR" fields and create a Pending Verifications Notice to Applicants/Recipients (State Form 2032) in WFMS to send to parent/parents of the baby added to the household.
10.	After AEABC runs, if no pending verifications are needed, update CLRC regarding the change and return to WFMS. Complete the Change Checklist, which triggers a Review for Eligibility Determination task for an SEC.
11.	Return to WFMS and close the task on the Task Home page.

3.6.15.2 Address Change

Step	Address Change
1.	In ICES, use the IQAI (Address Inquiry) function to determine if there is already an open case at the new address reported. If there is a match, reconcile this change in accordance with policy before completing the following steps.
2.	In AEICI, update the address information in the case with the new address information that was reported.

Step	Address Change
3.	Once AEICI is updated, there is a question on the bottom of the screen asking, "HAS THE HOUSEHOLD MOVED? (Y/N)". The answer needs to be "Y" so that the driver flow can be initiated.
4.	Complete the subsequent screens in the driver flow, updating information based on what was submitted by the applicant/recipient.
5.	When AEFSC displays, make sure to enter in the frequency "FRQ" of the shelter costs to "T" for terminated. In the "VR" field, enter in "?" and create a new entry for the new shelter costs that were reported. If the individual did not report a new amount, create an estimate of the information to capture the need for pending information to be submitted after AEABC runs. If the individual submitted proof of her new shelter costs, use the verifications to update the fields accordingly.
6.	When AEFUC displays, follow the same instructions in Step 4.
7.	Continue through the driver flow running through AEABC.
8.	If it is necessary to obtain proof of shelter costs, etc. from the individual, return to WFMS and create a <i>Pending Verifications Notice for Applicants/Recipients</i> (State Form 2032) and give the individual ten (10) days to return the necessary verifications.
9.	Update CLRC in ICES regarding the reported change, the actions taken, what was requested on the "Pending Form" and when the information is due back.
10.	Return to WFMS and close the task.

3.6.15.3 New Individual Moves into the Household

Step	New Individual Moves into the Household
1.	In ICES, use the IQIS (Individual Search Inquiry) function to determine if the new individual being added to the case is already receiving assistance or not.
2.	Once the search is completed and no matches are found, go into the case in ICES and update AEIID with the new individual's information. If a match is found, reconcile this change in accordance with policy before moving on to the following steps.
3.	The Clearance screens in ICES appear next. Match the information known to the system with the information provided regarding the new household member.
4.	The driver flow now starts. Update all necessary screens using the verifications that were submitted related to the new individual.
5.	If there is not enough information to complete all the screens, create a <i>Pending Verification Notice for Applicants/Recipients</i> (State Form 2032) in WFMS to send to the Client after AEABC is completed.

Step	New Individual Moves into the Household
6.	Information for the individual that may be needed:
	✓ Income
	✓ Resources
	✓ Portion of Shelter Costs that he/she is paying
	✓ Birth Certificate
	✓ Social Security Card
	✓ Driver's License (photo ID of some sort)
	✓ How the individual is related to the other household members.
7.	Once the information has been updated in ICES and the Pending Form, if needed, is completed in WFMS, update CLRC with the information updated in ICES, actions taken, the information that is pending, and when that information is due back.
8.	Close the task in WFMS.

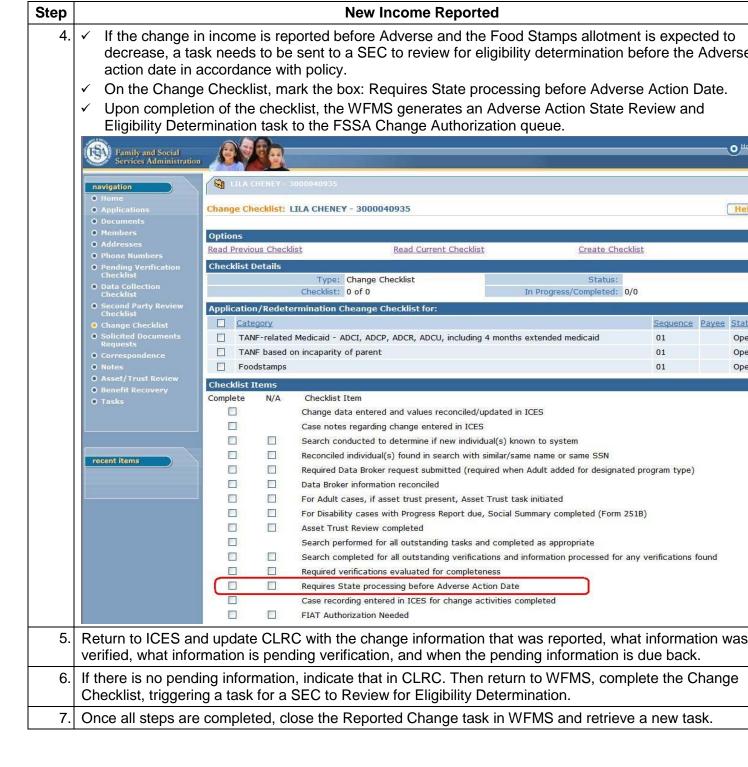
3.6.15.4 Remove an Individual from a Household

Step	Remove an Individual from a Household
1.	On the ICES screen AEIID under the Delete Code "DC" field; enter in a code related to the reason the individual is no longer in the household. Access the Reference Table for this by using Shift+#+Enter in the "DC" field.
2.	After the "DC" has been entered, press Enter to complete the screen. The driver flow is now initiated.
3.	Make sure the individual and/or her information is no longer appearing on any of the subsequent screens. If the individual had jointly-owned resources with anyone in the household, make sure to update AERJO and, if necessary, AERVH with code "99" representing the resources are jointly-owned with someone not living in the household.
4.	After running AEABC, update CLRC with the information related to the change to remove someone from the household.
5.	Return to WFMS, complete the Change Checklist, triggering a task for a SEC to Review for Eligibility Determination.
6.	Close the Reported Change task in WFMS.

3.6.15.5 New Income Reported

Step	New Income Reported
1.	In ICES, go to the appropriate income screen:
	✓ New Earned Income: AEIEI and AEINC
	✓ New Self-Employment Income: AEISE
	✓ New Unearned Income: AEFUI

Step		New Income Reported
2.	✓	Update the screen using all information available from the change that was reported.
	✓	If insufficient information was provided with the change, update using estimated information to capture that there is pending information needed once AEABC runs.
	✓	Make sure to use "?" in the "VR" fields for all information updated.
	✓	When updated, run AEABC.
	✓	Document in CLRC what information was used and why.
3.	✓	After AEABC runs, return to WFMS and create a Pending Form requesting all information/verifications needed to complete the reported change in income for the individual with new income.
	✓	If the individual has a release on file to obtain information from third parties for her case, send a Request for Earnings Information (State Form 0065) to the new employer with a copy of the release
	✓	Inform the Client via the Pending Form that the information has been requested from her new employer, but if the information is not obtained in ten (10) days from the date on the notice, the individual's benefits may be denied or discontinued.
	✓	If there is no release on file, send the Pending Notice to the individual for all the information associated with the new income reported.
	✓	If the income reported is for self-employment or unearned income, send a Pending Notice to the Client to request the information.



3.6.15.6 Report of Change in or Loss of Income

Step	Report of Change in or Loss of Income
1.	In ICES, update the appropriate income. (See Section 3.6.15.5 New Income Reported, Step 1 for appropriate screens.)
2.	To update the information in the Budget Method "BGT MTD" field, terminate "T" the income that is currently there, and in the "VR" field, use "?" until the verifications are submitted. Create estimated information and again use "?" in the "VR" field so that the information is captured on AEPND after AEABC runs.
3.	If all the verifications are received with the change, update the screens using that information.
4.	Run AEABC, if any verification is needed to complete the change, return to WFMS and create a Pending Form to send to the Client to verify the change or loss of income.
5.	If there is no pending information needed or the Pending Form has been completed in WFMS, in ICES update CLRC with all information related to the reported change, the information submitted with the change, the verifications needed, when the information is due back, and all actions taken on the case.
6.	If there is no pending information, return to WFMS, complete the Change Checklist, triggering a task for a SEC to Review for Eligibility Determination. Then close the Reported Change task.
7.	If there is pending information return to WFMS, close the Reported Change task, and retrieve the next task.

3.6.15.7 Change in Shelter Costs

Step	Change in Shelter Costs
1.	In ICES, update AEFSC and/or AEFUC based on the information regarding the change that was reported.
2.	Use the same steps in Section 3.6.15.2 Address Change <insert hyperlink=""> from Step 4 thru 10.</insert>

3.6.15.8 Report of Death

Step	Report of Death
1.	In ICES, update AEIDC regarding the individual who has been reported as deceased.
2.	Run AEABC and update CLRC in ICES with the information related to the change reported involving the death of a household and/or AG member.
3.	Park the task (and document the reason). The change on AEIDC will run in an overnight batch to AIM. The next day, remove the individual from the case.
4.	On AEIID in the "DC" field, update with "DT" for death.

Step	Report of Death
5.	If there are still other household members in the household who are receiving benefits as the driver flow runs, make sure to terminate all income, etc. related to the deceased individual.
6.	After AEABC is run, determine if there is any pending information needed to complete the change task. If there is additional information needed, return to WFMS to create a Pending Form to send to the household.
7.	If no pending information is needed or the Pending Form has already been created, return to ICES and update CLRC with all information provided associated with the change, any pending information needed, when it is due (if necessary), and what actions were taken.
8.	After updating CLRC in ICES, return to WFMS. Complete the Change Checklist, triggering a task for a SEC to Review for Eligibility Determination.
9.	If the case is not ready for review, return to WFMS, close the Reported Change task, and retrieve the next task.

3.6.15.9 Full Family Sanction Processing

When an individual is non-compliant with either the requirements for IMPACT or IV-D, then the individual is sanctioned. The time frame for the sanction depends on when the client "cures" her sanction or how many previous sanctions have been imposed. Once an individual in an AG is sanctioned, then all members of the AG are sanctioned, and the benefits are discontinued.

Step	Full Family Sanction Processing
1.	Retrieve the task for Alert 213 Full Family Sanction from the Task Home Page.
3.	Review the Task Name and the Summary/Instructions.
4.	Retrieve the case in ICES.
5.	Review the reasons for the sanction by
	 entering AEOIE in Parms and the Case Number in Next Tran or checking the Reason Codes used on AEWAA by entering RFDI in Parms and TSRC in Next Tran.
6.	Review the program and type of sanction that is indicated. If the sanction is for non-compliance with IMPACT, go to Step 6. If the sanction is for failure to comply with IV-D, skip to Step 9.
7.	Review the Work Registration codes on AEIWP.
8.	Make sure that the individual is coded properly. If the individual is disabled, pregnant in the third trimester, caring for an incapacitated family member, has a child born in the past 12 weeks, or is pending a decision on Medicaid Disability from the Medicaid Medical Review Team, then the individual cannot be sanctioned for non-compliance with IMPACT activities.

Step	Full Family Sanction Processing
9.	If the individual should not be sanctioned, skip to Step 11.
	If the individual should be sanctioned, skip to Step 16.
10.	Review AEIAC to make sure that the client has not been approved for Good Cause for non-compliance with obtaining child support; if she has been approved, she cannot be sanctioned for non-compliance with IV-D.
11.	 If the individual should not be sanctioned for non-compliance with IV-D, go to Step 11.
	 If the individual should be sanctioned for non-compliance with IV-D, skip to Step 16.
12.	Update CLRC with the reason(s) the individual should not be sanctioned and enter the information used to make this determination.
13.	Return to WFMS and select Tasks from the Left Navigation bar.
14.	Select Create Task from the top of the Task Page.
15.	Select User Defined from the list, and create a User Defined task with the Subject: Sanction Request Denied. Select the correct client name in the Case Participant drop-down. Assign the task to the Arbor Communications queue and enter comments notifying the Arbor Case Manager that the individual is not being sanctioned at this time and requesting that the Case Manager remove the sanction.
16.	From the Left Navigation bar, select Tasks and select the task for Alert 213: Full Family Sanction.
17.	Return to the case in ICES and run AEABC.
18.	Update CLRC with all actions taken on the case.
19.	In WFMS, from the Left Navigation, select the Change Checklist.
20.	Complete the Change Checklist for the AG.
21.	Return to the Case Home Page in WFMS.
22.	Select Tasks from the Left Navigation bar.
23.	Select the task for Alert 213: Full Family Sanction.
24.	Select Close Task from the top of the Task Home Page.

3.6.16 Reported Changes to be Added

Many other changes can be reported by an individual or a third-party outside of the alerts that are tasks and the changes listed above. This is a list of some of those changes. As implementation of the modernized solution proceeds, additional instructions will be included for each of these changes. These are examples of additional changes that may be reported; however, changes that are reported are not limited to these examples.

3.6.16.1 Change in Dependent Care Costs

This Section is under construction.

3.6.16.2 Change in Payments to Dependents

This Section is under construction.

3.6.16.3 Change in TPL Coverage

This Section is under construction.

3.6.16.4 Add TPL Coverage

This Section is under construction.

3.6.16.5 Change in Medical Expenses

This Section is under construction.

3.6.16.6 Change in Household Relationships (Marriage or Divorce)

This Section is under construction.

3.6.16.7 Change in School Status

This Section is under construction.

3.6.16.8 Individual in Household is Pregnant

This Section is under construction.

3.6.16.9 Change in Individual's Name

This Section is under construction.

3.6.16.10 Change in Citizenship Status

This Section is under construction.